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2 WATER WELL OWNER: RR#, St. Address, Box #: City, State ZIP Code:	<input type="checkbox"/> GPS unit (Make/Model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey <u>Est. Accuracy:</u> <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m

5 TYPE OF BLANK CASING USED:

☐ Steel ☐ RMP (SR) ☐ Wrought ☐ Fiberglass ☐ Other (Specify below)
☐ PVC ☐ ABS ☐ Asbestos-Cement ☐ Concrete Tile _____

Blank casing diameter _____ in. Was casing pulled? Yes ☐ No ☐ If yes, how much _____

Casing height above or below land surface _____ in.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) _____ and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) _____ under the business name of _____ by (signature) _____

Revised 1/29/2014