

WATER WELL RI		VV VV C-3	022440		sion of Water		W 11 ID		
		e in Well Use		1	irces App. No.	T 1: N 1	Well ID	NY 1	
1 LOCATION OF WA	Fraction	1/, 1/,	Secti	ion Number	Township Numb		ge Number		
County:	1/4 1/4	1/4 1/4		1 4 1 1 1	T S	R	□E □W		
2 WELL OWNER: La Business:	st Name:	First:		Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:					
Address:	direction from hearest town of intersection): If at owner's address, check here:								
Address:									
City:	State:	ZIP:			1				
3 LOCATE WELL	4 DEPTH OF COM	PLETED WEL	τ.•	ft. 5 Latitude:(decimal degrees)					
WITH "X" IN	Depth(s) Groundwater								
SECTION BOX:	SECTION BOX: 2) ft. 3) ft., or 4)								
1	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:				
	below land surface, measured on (mo-day-yr				— • • • (••••• • • • • • • • • • • • • •				
NW NE	above land surface, measured on (mo-day-yr				(1				
	Pump test data: Well water was ft. after hours pumping gg				☐ Land Survey ☐ Topographic Map				
E E	Well w			Online Mapper:					
SW SE	after hours								
	Estimated Yield:gpm			6 Elevation :ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to ft								
mile	1								
7 WELL WATER TO BE USED AS:									
1. Domestic:		ter Supply: well ID				ield Water Supply: 1			
Household	 Dewatering: how many wells? Aquifer Recharge: well ID 								
☐ Lawn & Garden ☐ Livestock	8. ☐ Monitorin								
2. Irrigation	9. Environmenta			12. Geothermal: how many bores?					
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extra				b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. ☐ Industrial	☐ Recovery					(specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:									
Water well disinfected? ☐ Yes ☐ No									
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded									
Casing diameter in. to ft., Diameter ft., Diameter ft.									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)									
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:									
Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)									
□ Conditious Stot □ Min Stot □ Gauze Wrapped □ Total Cut □ Diffied Holes □ Other (Specify)									
SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank	Lateral Line				ivestock Pens		cide Storage		
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)									
Direction from well?		Distance from	m well?			ft			
10 FROM TO	LITHOLOG		FRO			THO. LOG (cont.) o		G INTERVALS	
			Note	.c.					
Notes:									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged									
under my jurisdiction and was completed on (mo-day-year)									
Kansas Water Well Cont	tractor's License No	This	Water We	ll Reco	ord was compl	leted on (mo-day-y	ear)		
under the business name	of	ELL OWNED 1	toin one f		da Ecc of of oo	for each compt			
under the business name of Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.									

KSA 82a-1212