

WATER WELL RE		W W C-3	003700		ion of Water		W 11 ID		
		e in Well Use		1	rces App. No.		Well ID	NY 1	
1 LOCATION OF WA	Fraction	1/ 1/	Secti	on Number	Township Numb		ige Number		
County:	1/4 1/4	1/4 1/4	. D	1 4 1 1 1	T S	R	□E □W		
2 WELL OWNER: Last Business:	Name:	First:		Street or Rural Address where well is located (if unknown, distance and					
Address:	direction from nearest town or intersection): If at owner's address, check here:							meck nere:	
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	L :	ft	5 Lotitud	n•		(daaimal daamaa)			
WITH "A" IN	Depth(s) Groundwater I			,					
SECTION BOA: $\begin{array}{cccccccccccccccccccccccccccccccccccc$									
WELL'S STATIC WATER LEVEL:									
	□ below land surface, measured on (mo-day-yr				······ GPS (unit make/model:)				
above land surface, measured on (mo-day) (WAAS enabled? Yes No)					
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W E	after hours			Online Mapper:					
SW SE	Well w								
	after hours pumping gpi Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
	Bore Hole Diameter:	ft. and							
mile			Other						
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. Public Water Supply: well ID									
☐ Household	6. Dewatering: how many wells?								
☐ Lawn & Garden	7. Aquifer Recharge: well ID								
☐ Livestock	8. Monitoring				mal: how many bore				
2. Irrigation	9. Environmental Remediation: well ID								
3. Feedlot					b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):				
4. Industrial	Recovery	☐ Injection							
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 diameter									
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)									
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage									
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well									
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well									
Direction from well?		Distance from	 n well?			ft			
10 FROM TO	LITHOLOG		FRO			THO. LOG (cont.) o		GINTERVALS	
10 11(3)(1	EITHOLOG	310 200	1100	,111	10 21	THO. EOG (cont.) o	I I Le Goli (SHVIERVIES	
Note					s:				
11 CONTRACTOR'S O	R LANDOWNER'S	S CERTIFICATI	ON: This	water	well was 🔲 o	constructed, 🗌 reco	onstructed,	or plugged	
under my jurisdiction and was completed on (mo-day-year)									
Kansas Water Well Contra	actor's License No	This	Water We	I Reco	rd was comp	leted on (mo-day-y	ear)		
under the business name o	nd one conv to WATER W	FILOWNER and rat	ain one for vo	ur record	ds Fee of \$5 00	for each constructed w	ell		
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