

	WELL K				0040		sion of Wate			****		
	l Record		e in Well I				irces App. N		T 1: N 1	Well ID	NY 1	
		ATER WELL:	Fraction		/ 1/	Secti	ion Numbe	er	Township Numb		nge Number	
County:  2 WELL OWNER: Last Name:			1/4	1/4 1	4 1/4	D	1 4 11	1	T S	R	□ E □ W	
2 WELL Business:		ast Name:	First:	· · · · · · · · · · · · · · · · · · ·								
Address:				direction	ection from nearest town or intersection): If at owner's address, check here:							
Address:												
City:		State:	ZIP:									
3 LOCATE WELL 4 DEPTH OF COMPLETED						ft	E Tatita	.da.			(1 ' 11 )	
WITH "A" IN Donth(s) Groundwater E				Incountered: 1) ft.								
SECTION BOX: Depth(s) Groundwater I						Longitude:         (decimal degrees)           Datum:         WGS 84         NAD 83         NAD 27						
Г	TER LEVEL: ft.				Source for Latitude/Longitude:							
□ below land surface.			measured	l on (mo-day	y-yr)		GPS (unit make/model:)					
above land surface					• • • • • • •	(WAAS enabled? ☐ Yes ☐ No)						
Pump test data: Well's			vater was ft.				☐ Land Survey ☐ Topographic Map					
w		. hours pumping gpm Well water was ft.				☐ Online Mapper:						
			ours pumping gpm									
Estimated Yield:							<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC					
			in. to ft. and				Source: Land Survey GPS Topographic Ma				opographic Map	
			in. to ft.				☐ Other					
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
☐ Household 6. ☐ Dewaterin						11. Test Hole: well ID						
			echarge: well ID									
☐ Livestock 8. ☐ Monitoring									al: how many bores			
2. Irrigation 9. Environmenta							a) Closed Loop    Horizontal    Vertical					
3. ☐ Feedlot ☐ Air Sparge 4. ☐ Industrial ☐ Recovery				Soil Vapor	Extraction	1	b) Open Loop					
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected?												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)												
SCREEN C		ATION OPENINGS AI	RE:	_	` *	ŕ						
	nuous Slot		auze Wrap						Other (Specify)			
		☐ Key Punched ☐ W					one (Open H					
		ED INTERVALS: From								ft. to		
		CK INTERVALS: From										
		L: Neat cement									• • • • • • • • • • • • • • • • • • • •	
Grout Interv	als: From	ft. to	. ft., From	١	. ft. to		ft., From	• • • • • •	ft. to	ft.		
Nearest sou   Septic		e <b>contamination:</b> \[ \sum_ Lateral Line	. г	☐ Pit Privy		Пτ	ivestock Pe	ne	□ Insectio	cide Storage	<b>.</b>	
Sewer		☐ Cess Pool		☐ I it I iivy ☐ Sewage L	ลฮดดท		Fuel Storage			oned Water		
	ight Sewer Lin			Feedyard			ertilizer Sto			ll/Gas Well		
Other (	Specify)											
	om well?		Dist	tance from v	well?							
10 FROM	TO	LITHOLOG	GIC LOG		FRO	M	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
					TAT 4	L						
					Notes	<b>s:</b>						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☐ constructed, ☐ reconstructed, or ☐ plugged												
under my i	urisdiction ar	on LAMBUWINER'S	o-dav-ve	ricalio ar)	14. IIIIS	water and th	wen was L his record i	_ co	nsuucieu, 🔝 IECC ie to the best of m	nisu ucted, v knowled	or □ prugged ge and helief	
Kansas Wa	ter Well Con	tractor's License No	y-yC	This W	ater Well	l Reco	ord was cor	nple	ted on (mo-day-ve	ear)		
under my jurisdiction and was completed on (mo-day-year)												
WC D											705 205 2555	
KS Departr	nent of Health a	nd Environment, Bureau of W	vater, Geolo	ogy Section, l	LUUU SW Jac	ckson S	t., Suite 420,	1 ope	ka, Kansas 66612-136	7. Telephon	e 185-296-3565.	