

WATER WELL RI		** ** C-3	1120		ion of Water		W 11 ID		
		ge in Well Use			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	. D	1 4 1 1 1	T S	R	□E □W		
2 WELL OWNER: La Business:	st Name:	First:					where well is located (if unknown, distance and		
Address:	direction from nearest town or intersection): If at owner's address, check here:							ineck nere:	
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	•	ft. 5 Latitude:(decimal degrees)							
WITH "X" IN				,					
SECTION BOX: Depth(s) Groundwater Encountered: 1)									
WELL'S STATIC WATER LEVEL:									
	□ below land surface, measured on (mo-day-yr				····· GPS (unit make/model:)				
above land surface, measured on (mo-day-yr) (WAAS enabled? \(\subseteq \text{ Yes} \subseteq \text{ No)}					
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W E	after hours		☐ Online Mapper:						
SW SE	Well w								
4 1	after hours pumping gpi Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter:	ft. and							
1 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 Re								
Livestock	8. Monitoring				mal: how many bore				
2. Irrigation	9. Environmenta				ed Loop Horizon				
3. Feedlot					b) Open Loop				
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (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 diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Stainless Steel □ PVC □ Other (Specify)									
☐ Steel ☐ Steinless 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. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From ft. to ft., From ft., From ft. to ft.									
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	well?			ft			
10 FROM TO	LITHOLOG		FRO			ITHO. LOG (cont.) o		G INTERVALS	
							-		
	Notes:								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged									
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFICATIO)N: This v	water v	well was	constructed, \square rec	onstructed,	or ∐ plugged	
under my jurisdiction and was completed on (mo-day-year)									
under the husiness name	of	1 111S V	valet WEII	NCCO.	iu was collip	icica on (mo-day-y	cai)		
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.									

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