

WATER WELL R  ☐ Original Record ☐		<b>vv vv C-3</b>	000-	L		on of Water			Well ID			
1 LOCATION OF W	<u> </u>	ge in Well Use Fraction				ces App. No		hin Numb		nga Numbar		
County:	1/4 1/4 1/4 1/4			Section Number			Township Number T S		Range Number R			
2 WELL OWNER: La			-	Duro1	Addross							
2 WELL OWNER: Last 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:												
Address:												
City:	State:	ZIP:										
3 LOCATE WELL	4 DEPTH OF COM	PLETED WEI	L:		ft.	5 Latitu	de.			(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater I			ft. 5 Latitude:								
SECTION BOX:	2) ft. 3		Dry Well Datum: \( \text{WGS 84} \) \( \text{NAD 83} \) \( \text{NAD 27} \)									
11	WELL'S STATIC WA	ft.	ft. Source for Latitude/Longitude:									
	below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)						
NW NE					• • • •							
	Pump test data: Well w		☐ Land Survey ☐ Topographic Map									
W Y E	after hours Well w			Online Mapper:								
SW SE	after hours											
	Estimated Yield:					6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to					Source:   Land Survey   GPS   Topographic Map						
mile	1 mile in. to ft.							☐ Other				
7 WELL WATER TO BE USED AS:												
1. Domestic:		iter Supply: well I										
Household	6. Dewaterin											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Re											
2. Irrigation	<ol> <li>Monitoring</li> <li>Environmenta</li> </ol>											
3. ☐ Feedlot	☐ Air Sparge	xtraction	••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water								
4. ☐ Industrial												
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected? $\square$ Yes $\square$ 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)												
								From	ft to	, ft		
SCREEN-PERFORATED INTERVALS: From												
GRAVEL PACK INTERVALS: From												
Grout Intervals: From												
Nearest source of possible		,				,						
☐ Septic Tank	☐ Lateral Line				☐ Li	vestock Pen	.S		cide Storage			
☐ Sewer Lines	Cess Pool	☐ Sewag				iel Storage			oned Water			
	☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
☐ Other (Specify)												
10 FROM TO	LITHOLOG		ın wei	FROM						IG INTERVALS		
TO TROM TO	LITHOLOG	SIC LOG		TROM		10	LITTIO. LO	G (cont.) of	LUUUIN	O INTERVALS		
					+							
				Notes:	L							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was $\square$ constructed, $\square$ reconstructed, or $\square$ plugged												
under my jurisdiction ar	d was completed on (m	no-day-year)		ar	nd thi	is record is	true to the	e best of m	y knowled	ge and belief.		
Kansas Water Well Con	tractor's License No	Thi	s Wat	er Well R	kecor	d was com	pleted on (	(mo-day-y	ear)	• • • • • • • • • • • • • • • • • • • •		
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.												