

WATER WELL R ☐ Original Record ☐		VV VV C-3	0000			ion of Water			Well ID		
	<u> </u>	e in Well Use Fraction				rces App. No		Jumb a		aa Numbaa	
1 LOCATION OF WATER WELL:				1/4	Section Number		1	Township Number T S		Range Number R □ E □ W	
County: 2 WELL OWNER: La				Durol	1 Addross v						
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown direction from nearest town or intersection): If at owner's address,											
Address:											
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM	PLETED WE	LL:		ft	5 Latitud	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				. 10.	ft. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 1										
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
X	below land surface, measured on (mo-day-yr					GPS (unit make/model:)					
NW NE	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map					o)	
	Pump test data: Well water wasft.										
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:					
SW SE	after hours pumping gp										
	Estimated Yield:	·P		6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic I						
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:		ter Supply: well					Field Water Sup				
Household	6. ☐ Dewatering: how many wells? 7. ☐ Aquifer Recharge: well ID										
☐ Lawn & Garden ☐ Livestock											
2. Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot	9. Environmental Remediation: well ID Air Sparge Soil Vapor Ext				•••	b) Open Loop Surface Discharge Inj. of Water					
4. ☐ Industrial	☐ Recovery		-				er (specify):				
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 in. to											
Casing height above land surface in. Weight											
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)											
								ım.	ft to	ft	
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
Grout Intervals: From											
Nearest source of possible		,				,					
☐ Septic Tank	□ Lateral Line				☐ Li	ivestock Pen			de Storage		
☐ Sewer Lines	Cess Pool	☐ Sewa				uel Storage			ed Water V	Vell	
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age 🔲 🤇	Dil Well	/Gas Well		
								£,			
Direction from well? 10 FROM TO	LITHOLOG		om we	FROM			LITHO. LOG (co		DI LICCINO	ZINTEDVALS	
TO TROW TO	LITHOLOG	JIC LOG		TROM		10 1	ZITTIO. LOG (CC	111.) Of 1	LUUUIN	JINTERVALS	
				Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged											
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Con	tractor's License No	Th	is Wat	er Well I	Recor	rd was com	pleted on (mo-	lay-yea	ar)		
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.											