

WATER WELL R ☐ Original Record ☐		VV VV C-3	2-100	L		on of Water	1		Well ID		
	<u> </u>	e in Well Use Fraction				ces App. No		nchin Numb		aga Numbar	
1 LOCATION OF WATER WELL: County:		1/4 1/4 1/4		1/4	Section Number			Township Number		Range Number R □ E □ W	
2 WELL OWNER: La			-	211201	al Address where well is located (if unknown, distance and						
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	IPLETED WEI	LL:		ft	5 Latitud	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater I		ft. 5 Latitude:								
SECTION BOX:	2) ft. 3		Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27								
17	WELL'S STATIC WA	ft.	Source for Latitude/Longitude:								
	☐ below land surface,			☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)							
NW NE	above land surface,		• • • •								
W X E	Pump test data: Well w		☐ Land Survey ☐ Topographic Map								
W E	after hours Well w			Online Mapper:							
SW SE	after hours		ŀ	6 Elevation:ft. ☐ Ground Level ☐ TOC							
	Estimated Yield:	pm									
S	Bore Hole Diameter:	ft. and						opographic Map			
mile											
1 mile in. to ft. Uniter											
1. Domestic:	5. Public Wa	ter Supply: well I	D			10. ☐ Oil	Field Wat	ter Supply: 16	ease		
☐ Household	6. Dewaterin										
☐ Lawn & Garden	7. 🗌 Aquifer Re										
Livestock	8. Monitoring										
2. Irrigation	9. Environmenta			a) Closed Loop							
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Extr					b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
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?											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter											
Casing height above land surface											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) ☐ 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)											
	☐ Key Punched ☐ W					ne (Open Ho		(Specify)			
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible											
☐ Septic Tank	☐ Lateral Line					vestock Pen	S		cide Storage		
☐ Sewer Lines	Cess Pool	☐ Sewa				iel Storage		_	oned Water		
☐ Watertight Sewer Lin					∐ Fe	ertilizer Stor	age	☐ Oil We	ll/Gas Well		
☐ Other (Specify)											
10 FROM TO	LITHOLOG		JIII WEI	FROM						G INTERVALS	
TO TROM TO	LITHOLOG	JIC LOG		TROM		10 1	ZITIIO. L	OG (cont.) of	TLUGGIIV	GIVILICVILIS	
				Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Con	tractor's License No	Thi	is Wat	er Well R	Recor	d was com	pleted or	ı (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.											
Les Department of Health at	La La vironincia, Dureau Of V	, a.c., Geology Beell	JII, 100	OD 11 JACKS	on St.	, Suite 720, I	opera, Kai	00012-130	,,. rerepiion	- 105 270-5505.	