

| WATER WELL R. ☐ Original Record ☐ | | VV VV C-3 | 2020 | | | ion of Water | 1 | ╛, | Well ID | | | |
|--|--|---------------------|-----------|-----------|--|---|--------------------|----------|------------|----------------------|--|--|
| | | e in Well Use | | | | rces App. No on Number | | | | aa Numban | | |
| 1 LOCATION OF WATER WELL: County: | | Fraction | | 1/4 | secu | on Number | Township N | S | R | ge Number □ E □ W | | |
| 2 WELL OWNER: La | | | | Dural | ral 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: | direction from heartst to will of intersection). If at a willer is address, effects from | | | | | | | | | | | |
| Address: | | | | | | | | | | | | |
| City: | State: | ZIP: | | | | 1 | | | | | | |
| 3 LOCATE WELL | 4 DEPTH OF COM | IPLETED WE | LL: | | . ft. | 5 Latitud | de. | | | (decimal degrees) | | |
| WITH "X" IN | Depth(s) Groundwater Encountered: 1) | | | | | ft. 5 Latitude:(decimal degrees) Longitude:(decimal degrees) | | | | | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) 🗆 1 | | | | Dry Well Datum: \(\pi\) WGS 84 \(\pi\) NAD 83 \(\pi\) NAD 27 | | | | | | | |
| 11 | WELL'S STATIC WATER LEVEL: | | | | ft. Source for Latitude/Longitude: | | | | | | | |
| 1 | □ below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr) | | | | | GPS (unit make/model:) | | | | | | |
| NW NE | | | | | | (WAAS enabled? ☐ Yes ☐ No) | | | | | | |
| | Pump test data: Well water was ft. | | | | ☐ Land Survey ☐ Topographic Map | | | | | | | |
| W E | after hours pumping gp. Well water was ft. | | | | | ☐ Online Mapper: | | | | | | |
| SW SE | after hours pumping gp | | | | | | | | | | | |
| | Estimated Yield:gpm | | | | | 6 Elevation:ft. Ground Level TOC | | | | | | |
| S | Bore Hole Diameter: in. to | | | | and Source: Land Survey GPS Topograph | | | | | | | |
| mile | | in. to ft. | | | | | ☐ Other | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | |
| 1. Domestic: | | ter Supply: well | | | | | Field Water Suppl | | | | | |
| Household | 6. Dewatering: how many wells? | | | | | | | | | | | |
| Lawn & Garden | 7. Aquifer Recharge: well ID | | | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | | | |
| ☐ Livestock 2. ☐ Irrigation | 8. Monitoring: well ID | | | | | 12. Geothermal: how many bores? | | | | | | |
| 3. ☐ Feedlot | 9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Ext | | | | ••• | a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water | | | | | | |
| 4. ☐ Industrial | ☐ Recovery | | _ | Attuction | | | 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 | | | | | | | | | | | | |
| 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: | | | | | | | | | | | | |
| | | | | | | | Other (Specify | | | | | |
| | ☐ Key Punched ☐ W | | | | | ne (Open Ho | | | C | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | | |
| Nearest source of possible | | It., FIOIII | 1 | ι. ιο | | It., FIOIII | It. tO | | 11. | | | |
| Septic Tank | Lateral Line | es 🔲 Pit P | rivv | | □Li | ivestock Pen | s \Box In | ecticide | e Storage | | | |
| ☐ Sewer Lines | Cess Pool | ☐ Sewa | | | | uel Storage | | | d Water | | | |
| ☐ Watertight Sewer Lin | | ☐ Feed | yard | | ☐ Fe | ertilizer Stor | age 🗌 Oi | Well/C | Gas Well | | | |
| Other (Specify) | | | | | | | | | | | | |
| Direction from well? | | | om we | | | | | | | | | |
| 10 FROM TO | LITHOLOG | FIC LOG | | FROM | l | TO I | LITHO. LOG (con |) or PL | JUGGIN | GINTERVALS | | |
| | | | | | - | | | | | | | |
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| | | | | Notes: | | | | | | | | |
| 110165. | | | | | | | | | | | | |
| | | | | † | | | | | | | | |
| 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 | Th | is Wat | er Well I | Recor | rd was com | pleted on (mo-da | y-year |) | | | |
| under the business name | of | | | | | | | | <u></u> | | | |
| 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. | | | | | | | | | | | | |
| Iso Department of Health at | Dureau Of v | . a.c., Georgy Beel | .511, 100 | S II Jack | Jon Dt. | ., 50110 720, 1 | opena, minaas 0001 | . 1507. | - crophone | . , 55 270 5505. | | |