

WATER WELL R ☐ Original Record ☐		VV VV C-3	2020	1		on of Water	ı		Well ID			
		ge in Well Use Fraction				ces App. No		orrenalain Muund		n an Mumban		
1 LOCATION OF WATER WELL: County:		1/4 1/4	1/4	Section Number		10	Township Number T S		Range Number R □ E □ W			
2 WELL OWNER: La		1/4		Duro1	al Address where well is located (if unknown, distance and							
2 WELL OWNER: Last Name: First: Street or Rural Address where well is I direction from nearest town or intersection): If												
Address:	and the first from the first to will of interpretation). If the owner is the first to the first											
Address:												
City:	State:	ZIP:			ı	1						
3 LOCATE WELL	4 DEPTH OF COM	PLETED WEI	L:		ft	5 Latitu	de.			(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				. ft. 5 Latitude:							
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 1											
17	WELL'S STATIC WA	ft.	ft. Source for Latitude/Longitude:									
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)						
- XNW NE	above land surface,		••••	(WAAS enabled? ☐ Yes ☐ No)								
	Pump test data: Well w		☐ Land Survey ☐ Topographic Map									
W E	after hours Well w	_		☐ Online Mapper:								
SW SE	after hours											
	Estimated Yield:					6 Elevation:ft. Ground Level TOC						
S	Bore Hole Diameter:	ft. and	t. and Source: Land Survey GPS Topographi									
mile	in. to ft.					Other						
7 WELL WATER TO BE USED AS:												
1. Domestic:		iter Supply: well I						Water Supply: 16				
Household	6. Dewaterin											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Re											
2. Irrigation	8. Monitoring											
3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extra ☐ Soil Vapor ☐ Soil ☐ Soil Vapor ☐ Soil ☐				•••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial	☐ Recovery		_					cify):				
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 in. to												
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)												
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From												
	CK INTERVALS: From							*				
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		,,				,						
☐ Septic Tank	☐ Lateral Line				☐ Li	vestock Pen	ıS		cide Storage			
☐ Sewer Lines	Cess Pool	☐ Sewaş				iel Storage			oned Water			
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age	☐ Oil We	ll/Gas Well			
☐ Other (Specify)												
10 FROM TO	LITHOLOG		Jiii we	FROM						IG INTERVALS		
TO TROW TO	LITHOLOG	SIC LOG		TROM		10	LITIIO	. LOG (cont.) of	LUGGIN	O INTERVALS		
				Notes:	<u>l</u>	ı						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged												
under my jurisdiction an	d was completed on (m	no-day-year)		aı	nd thi	is record is	true t	o the best of m	y knowled	ge and belief.		
Kansas Water Well Con	tractor's License No	Thi	s Wat	er Well F	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.										