

WATER WELL R ☐ Original Record ☐		VV VV C-3	1102			ion of Water			Well ID		
	<u> </u>	e in Well Use Fraction				rces App. No on Number		Mumb		ga Numbar	
1 LOCATION OF WATER WELL:		1/4 1/4 1/4		1/4	Secu	on Number		Township Numb T S		ge Number □ E □ W	
County: 2 WELL OWNER: La				Durol	T S R E W Il Address where well is located (if unknown, distance and						
Business:	ist name:	First:									
Address:	direction from nearest town or intersection): If at owner's address, check here:										
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)					t. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 1										
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	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					lo)	
	Pump test data: Well water was ft.										
W X E	after hours pumping gp Well water was ft.					☐ Online Mapper:					
SW SE	after hours pumping										
	Estimated Yield:	5P		6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic						
mile		ft.	Other								
7 WELL WATER TO BE USED AS:											
1. Domestic:		ter Supply: well									
Household	6. ☐ Dewatering: how many wells?7. ☐ Aquifer Recharge: well ID										
☐ Lawn & Garden ☐ Livestock											
2. Irrigation	8. Monitoring: well ID						ermal: how man				
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		_				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)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From											
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		,				,					
☐ Septic Tank	☐ Lateral Line				☐ Li	ivestock Pen	s \square	Insection	cide Storage		
☐ Sewer Lines	☐ Cess Pool	☐ Sewa				uel Storage			oned Water	Well	
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age 🗌	Oil We	ll/Gas Well		
☐ Other (Specify)											
10 FROM TO	LITHOLOG		rom we	FROM						G INTERVALS	
TO TROM TO	LITHOLOG	JIC LOG		TRON	1	10 1	ZITIO. LOG (i	. OIII.) OI	LUGGIN	JINTERVALS	
				Notes:	I						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged											
under my jurisdiction ar	id was completed on (m	no-day-year)		a	nd th	is record is	true to the be	st of m	y knowled	ge and belief.	
Kansas Water Well Con	tractor's License No	Th	iis Wat	ter Well	Recor	rd was com	pleted on (mo	-day-ye	ear)	•••••	
under the business name	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.											