

WATER WELL RI  ☐ Original Record ☐		<b>VV VV C-3</b>	200-100	DIVI	sion of Wate			Well ID		
		ge in Well Use Fraction			urces App. N tion Numbe		wnship Numbe		ge Number	
1 LOCATION OF WATER WELL: County:		1/4 1/4	1/4	1/4	uon Numbe		T S	R		
2 WELL OWNER: Last Name:		First:		-	al Address					
Business:		reet or Rural Address where well is located (if unknown, distance and ection from nearest town or intersection): If at owner's address, check here:								
Address:								🗀		
Address:	<b>a</b> .									
City:	State:	ZIP:								
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:					5 Latitu	ıde:			(decimal degrees)	
SECTION ROX: Depth(s) Groundwater Encountered: 1)					Longi	itude:			(decimal degrees)	
N	2) ft. 3) ft., or 4) ∐ I				Datum	n: WG	S 84 🔲 NAD	83 🔲 N	AD 27	
	WELL'S STATIC WATER LEVEL:  □ below land surface, measured on (mo-day-yr)						ude/Longitude:			
	above land surface					•	make/model:			
NW NE	Pump test data: Well w			· (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map						
W E	after hours pumping gpm				Online Mapper:					
	Well v									
SW SE	after hours Estimated Yield:		gpm	om 6 Elevation:ft. ☐ Ground Level [				Level TTOC		
		gpm in. to ft. and			Source:   Land Survey   GPS   Topographic Map					
S			D Other							
1 mile  in. to ft. Under										
1. Domestic:		ater Supply: well II	D		10. □ Oi	l Field W	ater Supply: lea	se		
Household	ls?									
☐ Lawn & Garden	echarge: well ID.			☐ Cased ☐ Uncased ☐ Geotechnical						
☐ Livestock	ock 8. Monitoring: well ID									
2.  Irrigation					a) Closed Loop _ Horizontal Uvertical					
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor				ction	b) Open Loop ☐ Surface Discharge ☐ Inj. of Water  13. ☐ Other (specify):					
4. Industrial	Recovery						-			
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										
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)										
	☐ Key Punched ☐ W				one (Open H		c. F	<b>C</b>	Ç.	
SCREEN-PERFORATED INTERVALS: From										
9 GROUT MATERIA										
Grout Intervals: From										
Nearest source of possible		10, 1 10111	16. 60		11., 1 10111		16. 60	16.		
☐ Septic Tank	☐ Lateral Line	es 🔲 Pit Pri	ivy		Livestock Pe	ns	☐ Insectici	de Storage		
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoo										
☐ Watertight Sewer Line					Fertilizer Sto	rage	☐ Oil Well	/Gas Well		
Other (Specify)							C.			
Direction from well?  10 FROM TO	LITHOLO			ROM			It. LOG (cont.) or I	DI LICCINO	ZINTEDVALC	
10 FROM 10	LITHULU	SIC LUG	1	KOM	10	LIITO.	LOG (cont.) of I	LUGGING	JINIERVALS	
									-	
Notes:										
11 00 700 1 000 000	OD 1 11770 04777777	a appares a :				_				
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFICAT	TON: T	nis water	well was	_ constr	ucted, $\ \ \ \ $ recor	structed,	or ∐ plugged	
under my jurisdiction an Kansas Water Well Cont	u was completed on (n	(10-uay-year	s Water V	and t Vell Dec	uns record 1	is ifue to nuleted a	uie dest of my	Knowledg ar)	e and benef.	
under the business name	of	1 1113	v		was COL	iipiciāu (				
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.										