

W	ATER	WELL	RECORD		n n C-3	5115	Divis	sion of Wate	er					
	- 0		Correction		e in Well Use			urces App. N			Well ID			
1			WATER WEL	L:	Fraction		Sect	ion Numbe	er	Township Number		nge Number		
	County	1/4 1/4 1 First:	1/4 <sup>1</sup> /4						$\Box E \Box W$					
2	WELL Business: Address:	OWNER:		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: City: State: ZIP:													
3	LOCAT	E WELL												
U	WITH "X" IN 4 DEPTH OF COMPLETED WELL:							5 Latitude:(decimal degrees)						
	SECTIO		Depth(s) Groundwater Encountered: 1)           2)					Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27						
	Ν	WELL'S STATIC WATER LEVEL: ft.								Source for Latitude/Longitude:				
	below land surface, measured on (mo-day-yr									nit make/model:		)		
	NW	NE			e, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)					
** 7			- c.	Pump test data: Well water was ft. after hours pumping gpm					□ Land Survey □ Topographic Map					
W		Well water was						Online Mapper:						
	SW	after hours pumping						6 Elevation: ft Cround Level []						
			Estimated Y			<b>6</b> 1	6 Elevation:							
		S Bore Hole Diameter: in. to												
1 mile														
	1. Domestic:       5. □ Public Water Supply: well ID       10. □ Oil Field Water Supply: lease													
	☐ Household 6. ☐ Dewatering: how many wells?							11. Test Hole: well ID						
		Lawn & Garden 7. Aquifer Recharge: well ID												
		☐ Livestock       8. ☐ Monitoring: well ID         ☐ Irrigation       9. Environmental Remediation: well ID						<ul><li>12. Geothermal: how many bores?</li><li>a) Closed Loop ☐ Horizontal ☐ Vertical</li></ul>						
	□ Freedlot □ Air Sparge □ Soil Vapor E							b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water						
4.	🗌 Industr	ial		Recovery	☐ Injection			13. 🗌 Other (specify):						
W	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 JOINTS: Glued Clamped Welded Threaded														
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.														
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No														
-	□ 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 ft. to ft., From ft. to ft. to ft. to ft.														
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. from ft. to ft. o ft. o ft. o ft. o ft. from ft. to ft. o ft. ft. from ft. ft. ft. ft. ft. ft. ft. ft. ft														
			ft. to ble contaminati		. ft., From	ft. to	•••••	ft., From		ft. to	ft.			
	Septic '	-		ateral Line	s 🗌 Pit Privy		ПΙ	Livestock Pe	ens	☐ Insectic	ide Storag	<u>,</u>		
	Sewer I			Cess Pool	Sewage L	agoon		Fuel Storage		Abando				
		ght Sewer I		leepage Pit			🗆 F	Fertilizer Sto	orage	🗌 Oil Wel	ll/Gas Wel			
					Distance from					ft				
	FROM	TO		ITHOLOG		FRC				HO. LOG (cont.) or	PLUGGIN	GINTERVALS		
						_								
						Note	s:							
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)														
un K	ider my ju ansas Wa	irisdiction	and was compl	eted on (n	io-day-year) This W	/ater Wel	and the and the and the and the and the and the angle ang	nis record i	15 true mnlet	e to the best of my	y knowlec	ge and belief.		
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year) under the business name of														
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.														
	-		and Environment, heks.gov/waterwel		vater, Geology Section,	1000 S W Ja	ckson S	s., suite 420,	, 10pek	ka, Kansas 66612-136		e 785-296-3565. SA 82a-1212		
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