

WATER WELL RI		// // C-3	230344		sion of Water		W 11 ID			
		e in Well Use			irces App. No.	T 1: N 1	Well ID	NY 1		
1 LOCATION OF WA	Fraction	1/ 1/		ion Number	Township Numb		ige Number			
County:	1/4 1/4	1/4 1/4		.1 4 11 1	T S	R	□E □W			
2 WELL OWNER: La Business:	st Name:	First:								
Address:	direction from nearest town or intersection): If at owner's address, check here							ineck nere:		
Address:										
City:	State:	ZIP:								
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:					5 Lotitud	··		(daaimal daamaaa)		
WITH "X" IN	Depth(s) Groundwater 1									
SECTION BOX:	SECTION BOX: $(2)$ ft $(3)$ ft or $(4)$									
N	WELL'S STATIC WATER LEVEL:									
	below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr Pump test data: Well water was					(unit make/model:		)		
NW NE						(WAAS enabled? ☐ Yes ☐ No)				
					☐ Land Survey ☐ Topographic Map					
W E	after hours			Online Mapper:						
SW   SE	Well w									
	after hours Estimated Yield:	gpm	6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter:	ft an	<u> </u>							
1 mile			u	Other						
1 mile  in. to ft. Uniter										
7 WELL WATER TO BE USED AS:   1. Domestic:   5. □ Public Water Supply: well ID										
Household	6. ☐ Dewaterin									
☐ Lawn & Garden	7. Aquifer Re									
Livestock	8. Monitorin									
2. ☐ Irrigation	<ol><li>Environmenta</li></ol>			a) Closed Loop						
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Extra				b) Open Loop  Surface Discharge Inj. of Water					
4. Industrial	☐ Recovery	☐ Injection	n		13. ☐ Other	(specify):		• • • • • • • • • • • • • • • • • • • •		
Was a chemical/bacteriological sample submitted to KDHE?										
Water well disinfected? ☐ Yes ☐ No										
8 TYPE OF CASING USED:  Steel PVC Other										
Casing diameter in. to ft., Diameter ft., Diameter ft.										
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)										
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
☐ Septic Tank	☐ Lateral Line	s 🔲 Pit Priv	vy		Livestock Pens	☐ Insecti	cide Storage			
☐ Sewer Lines										
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
								CINTEDIALC		
10 FROM TO	LITHOLOG	TIC LUG	FR	OM	TO LI	THO. LOG (cont.) o	r PLUGGIN	JINTEKVALS		
				+						
				+						
			Not	ec.						
110005										
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 Cont	tractor's License No	This	Water We	ell Reco	ord was comp	leted on (mo-day-y	ear)			
under the business name	of									
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, Burgay of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367, Telephone 785-296-3565.										
IND Department of Health at	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.									

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html