WATER WELL R		Form WV			ision of Water				
Original Record		☐ Change in			ources App. No.		Well ID		
1 LOCATION OF WATER WELL: Fraction				Section Number Township Number Range Number					
County: 05 borne 45E 45W 4									
2 WELL OWNER: L	ast Name: 🚜	nrad Fi	C.E.16			nere well is located	,		
Business: Address:	Dusiness: I direction from nearest fown or intersection): If at owner's address, check here: I i								
Address:									
City: Osborne State: K5 ZIP: 67473									
3 LOCATE WELL				44 8	f I atitud			(4	
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)					5 Latitude:(decimal degrees) Longitude:(decimal degrees)			
SECTION BOX:	2) ft. 3) ft., or 4)				Datum: WGS 84 NAD 83 NAD 27				
N	WELL'S STATIC WATER LEVEL:					or Latitude/Longitude		AD 21	
	below land surface, measured on (mo-day-ye					GPS (unit make/model:)			
NW NE					(WAAS enabled? ☐ Yes ☐ No)				
<u> </u>	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W					Online Mapper:				
SW SE	- SE Well water was ft. after hours pumping gp								
	Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC				
S					Source: Land Survey GPS Topographic Map				
1 mile			in. to	ft.	[☐ Other			
7 WELL WATER TO BE USED AS:									
1. Domestic:	5. □	Public Water S	Supply: well ID		10. 🔲 Oil F	Field Water Supply: le	ase		
☐ Household									
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID					d ☐ Uncased ☐ (
	Elivestock 8. Monitoring: well ID					mal: how many bores			
2. Irrigation 9. Environmental Remediation: well ID						ed Loop			
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex 4. ☐ Industrial ☐ Recovery ☐ Injection				Extraction	b) Open Loop				
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									
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									
						ft., From			
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Septic Tank		Lateral Lines	☐ Pit Privy	₽.	Livestock Pens	□ Insectio	ide Storage	•	
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoo									
☐ Watertight Sewer Lin	nes 🗆	Seepage Pit	☐ Feedyard		Fertilizer Stora	ge 🔲 Oil We	ll/Gas Well		
						_			
Other (Specify)	.504xh		Distance from we	ell? <i>S.O.</i>	<i>A</i>	ft.			
10 FROM TO		LITHOLOGIC	LOG	FROM	TO L	ITHO. LOG (cont.) or	PLUGGIN	G INTERVALS	
0 3	TOPS	,		-					
3 20	Brown								
20 44	clay 3	SAnd ROCK	shale						
	<i>U</i>								
	, , , , , , , , , , , , , , , , , , ,							4444	
				Notore					
	Notes:								
11 CONTRACTORS	ORIAND	OWNER'S C	FRTIFICATION	I. This water	r well was 📈	constructed reco	nstructed	or nlugged	
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)									
Kansas Water Well Con	under my jurisdiction and was completed on (mo-day-year)								
under the business name of									
INSTRUCTIONS: Send one copy to WATER WELL WNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.									
I Department of He	ealth and Environn	nent, Bureau of Wate	er, Geology Section, 1000	SW Jackson St., S	Suite 420, Topeka, k	Cansas 66612-1367. Telepho	one (785) 296-1	J303.	

KSA 82a-1212

Visit us at http://www.kdheks.gov/waterwell/index.html

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