

WATER WELL R ☐ Original Record ☐		vv vv C-3	2020	I		on of Water			Well ID	
1 LOCATION OF W.	<u> </u>	ge in Well Use Fraction				rces App. No		ownshin Numb		nga Numbar
County:	1/4 1/4 1/4 1/4 1/4			Section Number		10	Township Number T S		Range Number R □ E □ W	
2 WELL OWNER: La	First:			Duro1	al Address where well is located (if unknown, distance and					
Business:										
Business: direction from nearest town or intersection): If at owner's address, check here: Address:										
Address:										
City:	State:	ZIP:			1	Т				
3 LOCATE WELL	4 DEPTH OF COM	PLETED WEI	L:		ft.	5 Latitu	de.			(decimal degrees)
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				ft. 5 Latitude:(decimal degrees) Longitude:(decimal degrees)					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I				Editate:					
11	WELL'S STATIC WA	ft.	ft. Source for Latitude/Longitude:					(IID 27		
	□ below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr)					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)				
NW NE					• • • •					
	Pump test data: Well w		☐ Land Survey ☐ Topographic Map							
W X E	after hours Well w			☐ Online Mapper:						
SW SE	after hours									
	Estimated Yield:	P		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 I						Water Supply: 16		
Household	6. Dewaterin									
☐ Lawn & Garden ☐ Livestock		echarge: well ID.								
2. Irrigation										
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		_					ecify):		
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:										
								ner (Specify)		
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Nearest source of possible		10., 1 10111	10	. 10		10., 1 10111 .		11. 10	11.	
☐ Septic Tank	☐ Lateral Line	es 🔲 Pit Pri	ivy		☐ Li	ivestock Pen	ıs	☐ Insection	cide Storage	2
☐ Sewer Lines	Cess Pool	☐ Sewag				uel Storage		☐ Abando	oned Water	Well
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age	☐ Oil We	ll/Gas Well	
☐ Other (Specify)										
10 FROM TO	LITHOLOG		om wel	FROM						IG INTERVALS
10 FROM TO	LITHOLOG	SIC LOG		FROM		10	LITHU	. LOG (cont.) of	FLUGGIN	UINTERVALS
					+					
					+					
				Notes:		I				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged										
under my jurisdiction and was completed on (mo-day-year)										
Kansas Water Well Con	tractor's License No	Thi	s Wat	er Well R	Recor	rd was com	pleted	l on (mo-day-y	ear)	• • • • • • • • • • • • • • • • • • • •
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.										