

WATER V			W W C-3	1173900 _{Divi}				W 11 ID			
			ge in Well Use		Resources App. No. Section Number			Well ID	NI1		
1 LOCATION OF WATER WELL:			Fraction Sect						-		
County: 2 WELL OWNER: Last Name:				Street or Rural Address where well is located (ii				R	B B W		
Business:	WNEK: La	st Name:	First:	direction from nearest town or intersection): If at ow							
Address:				direction i	ioiii iie	alest town of intersection). If at owner's address, effect fiere.					
Address:	Address:										
City:		State:	ZIP:			T					
3 LOCATE		4 DEPTH OF COM	PLETED WELL: ft.			5 Latitude:(decimal degrees)					
			Encountered: 1) ft.				ude:				
2) ft.			3) ft., or 4) 🗌 Dry Well				□ WGS 84 □ NA				
			VELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:				
'	1	below land surface, measured on (mo-day-yr)				□GP	S (unit make/model: .				
X NW NE		above land surface, measured on (mo-day-yr)				(WAAS enabled? Yes No)					
w E		after hours pumping gpm				☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
		Well water was ft.					ille Mapper				
SW SE		after hours pumping gpm					•				
		Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC					
S		Bore Hole Diameter: in. to f			Source: ☐ Land Survey ☐ GPS ☐ Topographic Ma						
1 mile iii. to it.											
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID											
☐ Househo	14	g: how many wells?			11. Test Hole: well ID						
			echarge: well ID		☐ Cased ☐ Uncased ☐ Geotechnical						
			g: well ID			12. Geothermal: how many bores?					
2. ☐ Irrigation 9. Environmenta			al Remediation: well ID			a) Closed Loop					
3. ☐ Feedlot ☐ Air Sparge						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial ☐ Recover			☐ Injection			13. Other (specify):					
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 diameter											
Casing height above land surface											
☐ Steel	TYPE OF SCREEN OR PERFORATION MATERIAL: □ 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											
GRAVEL PACK INTERVALS: From											
		ft. toe contamination:	π., From	π. το		II., From	п. то	π.			
☐ Septic Ta		Lateral Line	s 🔲 Pit Privy		ПΙ	ivestock Pen	s □ Insect	icide Storage			
Sewer Lin		☐ Cess Pool	☐ Sewage La	goon		uel Storage		loned Water \			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
☐ Other (Specify)											
							TO LITHO. LOG (cont.) or PLUGGING INTERVALS				
10 FROM	TO	LITHOLOG	FIC LOG	FROM	VI .	TO 1	LITHO. LOG (cont.) o	r PLUGGIN	JINTERVALS		
					_						
				+							
				Notes	:						
				7							
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	r Well Cont	tractor's License No	This Wa	tter Well	Keco	rd was com	pieted on (mo-day-y	/ear)	••••		
under the bus	S	of	ELL OWNER and retain of	one for you	r record	ds. Fee of \$5.0	00 for each constructed w	vell.	• • • • • • • • • • • • • • • • • • • •		
KS Departmen	nt of Health ar	nd Environment, Bureau of W	Vater, Geology Section, 10	00 SW Jacl	kson St	t., Suite 420, T	Copeka, Kansas 66612-13	67. Telephone	2785-296-3565.		
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. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212											