

WATER WELL RI		VV VV C-3			on of Water				
				esources App. No.		T 1: N 1	Well ID	N. 1	
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4 1/4 1/4		Section Number		Township Numb		ge Number	
County: 2 WELL OWNER: Last Name:				n 1	1 4 1 1 1	T S R □ E □ W ddress where well is located (if unknown, distance and			
Business:	First:					<u> </u>			
Address:	direction from nearest town or intersection): If at owner's address, check here:							illeck liele.	
Address:									
City:	State:	ZIP:			Т				
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:				. ft.	ft. 5 Latitude:(decimal degrees)				
WITH "X" IN SECTION BOX:	Depth(s) Groundwater 1		Longitude:(decimal degrees)						
N SECTION BOX:	2) ft. 3) ft., or 4) □ 1					□ WGS 84 □ NA			
	WELL'S STATIC WATER LEVEL:					or Latitude/Longitude			
	below land surface, measured on (mo-day-y above land surface, measured on (mo-day-y					(unit make/model:			
NW NE	Pump test data: Well w				(WAAS enabled? Yes No)				
w	after hours			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
	Well w			Опппе імаррет					
SW SE X	after hours	gpm		6 Florestions 6 G County I and G TOC					
	Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S 1 mile	Bore Hole Diameter: in. to				Other				
1 mile in. to ft. Uother									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
☐ Household 6. ☐ Dewatering: how many wells?									
☐ Lawn & Garden									
☐ Livestock	8. Monitoring			12. Geothermal: how many bores?					
2. Irrigation	9. Environmental Remediation: well ID .				a) Closed Loop				
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex					b) Open Loop Surface Discharge Inj. of Water				
4. Industrial Recovery 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 height above land surface in. Weight lbs./ft. Wall thickness or gauge No									
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									
Grout Intervals: From									
Nearest source of possible				_					
Septic Tank	Lateral Line				ivestock Pens		cide Storage		
Sewer Lines	Cess Pool	☐ Sewage La			uel Storage		oned Water	well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well									
Direction from well?		Distance from w	ell?			ft			
10 FROM TO	LITHOLOG		FROM			THO. LOG (cont.) or		G INTERVALS	
			Notes:						
110005.									
			\dashv						
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 Wa	ater Well I	Recor	rd was comp	leted on (mo-day-y	ear)	•••••	
under the business name of									
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