

WATER WELL R ☐ Original Record ☐		VV VV C-3	070			ion of Water			Well ID			
1 LOCATION OF WA	<u> </u>	e in Well Use Fraction				rces App. No		in Numb		nga Numbar		
County:	1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4			Section Number			Township Number T S		Range Number R □ E □ W			
2 WELL OWNER: La	First:			Durol	l Address where well is located (if unknown, distance and							
Business:			om nearest town or intersection): If at owner's address, check here:									
Address:												
Address:												
City:	State:	ZIP:				1						
3 LOCATE WELL	4 DEPTH OF COM		ft	5 Latitude:(decimal degrees)								
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				. 10.	Longitude:						
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I				Bongroude:							
17	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)						
NW NE	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map					No)		
	Pump test data: Well water was											
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:						
SW SE	after hours pumping gp.											
	Estimated Yield:	5P		6 Elevation:ft. ☐ Ground Level ☐ TOC								
	Bore Hole Diameter: in. to f				and Source: Land Survey GPS Topograp							
mile	in. to ft.						☐ Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:		ter Supply: well										
Household	6. Dewatering: how many wells?											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID											
2. ☐ Irrigation	8. Monitoring: well ID						ermal: how n					
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							13. Other (specify):					
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected? \square Yes \square 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:												
							Other (Sp	ecify)				
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		It., FIOIII	1	1. 10		It., FIOIII	1 .	. 10	It.			
Septic Tank	Lateral Line	es 🔲 Pit Pi	ivv		□Li	ivestock Pen	s I	Insection	cide Storage	2		
☐ Sewer Lines	Cess Pool	☐ Sewa				uel Storage			oned Water			
☐ Watertight Sewer Lin		☐ Feed	yard		☐ Fe	ertilizer Stor	age [☐ Oil We	ll/Gas Well	:		
☐ Other (Specify)												
Direction from well?			om we									
10 FROM TO	LITHOLOG	FIC LOG		FROM	1	TO I	LITHO. LOG	(cont.) or	PLUGGIN	IG INTERVALS		
										_		
				Notes:								
110165												
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 Con	tractor's License No	Th	is Wat	ter Well l	Recor	rd was com	pleted on (n	no-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.											
Les Department of Health at	La La vironincia, Dureau Of V	, a.c., Geology Beel	1011, 100	JO D TT JACK	الا 1100.	, Duite +20, I	opena, mansas	55012-130	,,. rerephon	0,00 270-3303.		