

WATER WELL RI ☐ Original Record ☐		WWC-5	_	J-102		ion of Water			Wall ID			
		e in Well Us	se			rces App. N		Township Numb	Well ID	n an Numban		
1 LOCATION OF WATER WELL: County:		Fraction		4 1/4	Section Number		r	Township Numb		Range Number R □ E □ W		
2 WELL OWNER: La		/4 /		r Duro	1 Addross v	vhor						
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:												
Address:										check here.		
Address:												
City:	State:	ZIP:										
3 LOCATE WELL		ft	5 Latitu	de.			(decimal degrees)					
WITH "X" IN						8						
SECTION BOX:	SECTION BOX: ft 3) ft or 4)					Bongitade:(decimal degrees)						
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	 below land surface, 	y-yr)			PS (u	nit make/model:)				
NW NE	above land surface, measured on (mo-day-yr)							(WAAS enabled? ☐ Yes ☐ No)				
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
WE	after hours pumpinggp					☐ Online Mapper:						
SW SE	Well water was fi											
	Estimated Yield:		. gpm		6 Elevation:ft. ☐ Ground Level ☐ TOC							
X	Bore Hole Diameter: in. to											
1 mile			Other									
1 mile in. to ft. Uniter												
1. Domestic: 5. Public Water Supply: well ID												
☐ Household	6. ☐ Dewatering: how many wells?											
Lawn & Garden			Cased Uncased Geotechnical					ાો				
☐ Livestock	8. Monitoring: well ID											
2. Irrigation	9. Environmental Remediation: well ID											
3. Feedlot Soil Vapor Ext					1	b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):						
4. Industrial	Recovery	∐ I	njection			13. ∐ Otl	ner (s	specify):				
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 in. to ft., Diameter ft., Diameter ft.												
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)												
								Juner (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												
Grout Intervals: From												
Nearest source of possible		10., 1 10111 .		. 10. 00		10, 110111 .						
Septic Tank	Lateral Line	s \square	Pit Privy		□L	ivestock Per	ıs	☐ Insection	cide Storage	2		
Sewer Lines	Cess Pool		Sewage La	agoon		uel Storage			oned Water			
☐ Watertight Sewer Line			Feedyard		☐ F	ertilizer Stor	rage	☐ Oil We	ll/Gas Well			
Direction from well?			nce from v									
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LITE	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
				77.4								
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged												
under my jurisdiction an	d was completed on (n	O-day-vee	ICATIO. ·)	IN: I MIS V	water '	wen was L] COI	ustructed, $\ \ \ \ \ $ rect	nistructed, v knowled	or plugged		
Kansas Water Well Cont	tractor's License No		. This W	ater Well	Reco	rd was con	າກlet	ed on (mo-day-v	ear)	ge and belief.		
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 ar	d Environment, Bureau of V	Vater, Geolog	y Section, 1	000 SW Jac	ckson S	t., Suite 420,	Topek	ka, Kansas 66612-136	7. Telephon	e 785-296-3565.		

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html