

WATER WELL R  ☐ Original Record ☐		W W C-5	1070			ion of Water	I		Well ID		
	<u> </u>	e in Well Use				rces App. No on Number		unahin Mumb		a a a Mumban	
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4		1/4	Secu	on Number		vnship Numb T S	R R	nge Number □ E □ W	
2 WELL OWNER: La				Duro	Il Address where well is located (if unknown, distance and						
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:	direction from nearest to will of intersection). If at a will is address, enterin near the										
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM	IPLETED WE	ELT:		ft	5 Latitu	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				10.	. ft.   5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I										
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-y					GPS (unit make/model:)					
NW NE	Pump test data: Well water wasft.  afterhours pumpinggp  Well water wasft.				• • • • • •	(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
W E											
SW SE											
	Estimated Yield:		,					on:ft. ☐ Ground Level ☐ TOC			
S	Bore Hole Diameter:		. ft. and	t. and Source: Land Survey GPS To							
mile						☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:	<ol><li>Public Wa</li></ol>					10. 🔲 Oil	Field Wa	ater Supply: 16	ease		
Household	6. ☐ Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID							Uncased			
Livestock	8. Monitoring: 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		_	Attaction							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:											
Water well distributed?   Yes   No     No     S TYPE OF CASING USED:   Steel   PVC   Other											
Casing diameter											
Casing diameter											
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:											
		auze Wrapped						r (Specify)			
	☐ Key Punched ☐ W					ne (Open Ho					
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		π., From	I	τ. το	• • • • • • •	п., From .		It. to	II.		
Septic Tank	□ Lateral Line	s 🔲 Pit I	Privv		Пт	ivestock Pen	c	□ Insecti	cide Storage	۵.	
Sewer Lines	☐ Cess Pool	□ Sew		oon		uel Storage			oned Water		
☐ Watertight Sewer Lin				,		ertilizer Stor	age		ll/Gas Well		
Other (Specify)											
Direction from well?			from we								
10 FROM TO	LITHOLOG	GIC LOG		FRON	1	TO 1	LITHO. I	LOG (cont.) or	PLUGGIN	IG INTERVALS	
				Natara							
Notes:											
11 CONTRACTOR'S	OR LANDOWNED'S	CERTIFICA	TION	· This w	ater s	well was [	Constri	icted 🗆 reco	nstructed	or nlugged	
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	T	his Wat	ter Well	Reco	rd was com	pleted o	n (mo-day-v	ear)		
under the business name	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.											
KS Department of Health a	na Environment, Bureau of W	vater, Geology Sec	tion, 100	JU SW Jack	cson St	., Suite 420, T	opeka, Ka	ansas 66612-136	7. Telephon	e /85-296-3565.	