

WATER WELL RI ☐ Original Record ☐		W W C-5		2100		sion of Wate			Wall ID			
1 LOCATION OF WA		e in Well I				irces App. N		Tourship Numb	Well ID			
	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb	er Ra	inge Number □ E □ W			
County: 2 WELL OWNER: La		/4 /		r Duro	1 Addross	who						
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:												
Address:												
City:	State:	ZIP:				1						
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)					
WITH "X" IN	WITH "A" IN Donth(s) Groundwater Engountered: 1)					8,						
SECTION BOX:	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$											
14	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr)					G	PS (unit make/model:)		
NW NE	above land surface, measured on (mo-day-yr)					(**************************************						
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
W E	afterhours pumpinggpr Well water was ft.					☐ Online Mapper:						
SW SE	after hours pumping gpi											
	Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter:	ft. and		Source: Land Survey GPS Topographic Map								
mile	in. to ft.					☐ Other						
7 WELL WATER TO BE USED AS:												
1. Domestic:	Public Wa							ld Water Supply: 10				
Household	6. Dewatering: how many wells?											
Lawn & Garden	7. Aquifer Recharge: well ID											
Livestock	8. Monitoring: well ID											
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extr					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial	☐ Recovery		Injection	Latraction	1							
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify):												
Water well disinfected? \square Yes \square No												
Water well distributed? Yes No No S TYPE OF CASING USED: Steel PVC Other												
Casing diameter												
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)												
☐ 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												
Nearest source of possible		. It., From	١	. It. to		It., From	• • • • •	It. to	It.			
Septic Tank	Lateral Line	е Г	☐ Pit Privy		Пι	ivestock Per	ne	□ Insecti	cide Storag	re.		
Sewer Lines	☐ Cess Pool		Sewage L	agoon		uel Storage			oned Water			
☐ Watertight Sewer Line						ertilizer Sto			ell/Gas Wel			
Other (Specify)												
Direction from well?												
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LIT	HO. LOG (cont.) or	r PLUGGII	NG INTERVALS		
				N T 4								
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged												
under my jurisdiction and	d was completed on (n	o-dav-ve	ear)	14. IIIIS '	and th	wen was L	_ CO s tru	nsuucieu, 🔝 IeCC ie to the best of m	v knowle	, or □ prugged dge and helief		
Kansas Water Well Cont	ractor's License No	y-yC	This W	ater Well	Reco	rd was con	nple	ted on (mo-dav-v	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.												
KS Department of Health an	a Environment, Bureau of V	vater, Geolo	ogy Section, 1	.000 SW Jac	ekson S	t., Suite 420,	Tope	ka, Kansas 66612-136	o/. Telepho	ne /85-296-3565.		

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