

WATER WELL RI		W W C-5		5114		sion of Wate			W-11 ID			
		e in Well U				rces App. N		T 1 N 1.	Well ID	NT1		
1 LOCATION OF WA	Fraction 1/4 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number			
County:	1/4	1/4 1/	_					R	□ E □ W			
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance an direction from pearest town or intersection): If at owner's address, check here.												
Business: direction from nearest town or intersection): If at owner's address, check here:												
Address:												
City:	State:	ZIP:										
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						5 Totitu	.d			(1 ' 11)		
WITH "X" IN	WITH "A" IN Donth(s) Groundwater Engountered: 1)					,						
SECTION BOX:	SECTION BOX: ft or 4)											
N	WELL'S STATIC WATER LEVEL:							Latitude/Longitude		VAD 21		
	☐ below land surface,				PS (ı	ınit make/model:)				
NW NE	above land surface, measured on (mo-day-yr)							WAAS enabled?		·		
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
W E	after hours pumpinggp					Online Mapper:						
SW SE	Well water was ft. after hours pumping gg											
	Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter: in. to fi											
1 mile	in. to ft				Other							
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
☐ Household	6. Dewatering: how many wells?											
☐ Lawn & Garden 7. ☐ Aquifer Recharge: well II						☐ Cased ☐ Uncased ☐ Geotechnical						
☐ Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?							
2. Irrigation	9. Environmental Remediation: well ID											
3. Feedlot					1	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 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:												
SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot												
□ 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	contamination:											
☐ Septic Tank	☐ Lateral Line		Pit Privy			ivestock Per			cide Storage			
☐ Sewer Lines	Cess Pool		Sewage La			uel Storage			oned Water			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well												
Direction from well?								ft				
10 FROM TO	LITHOLOG			FRO				HO. LOG (cont.) 01		C INTEDVALS		
10 PROW TO	LITHOLOG	ole rog		TRO	IVI	10	LII	IIO. LOG (cont.) of	LUGGIN	UINTERVALS		
				Notes	<u> </u>	<u> </u>						
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTI	FICATIO	N: This	water	well was	co	nstructed, \square reco	onstructed,	or plugged		
under my jurisdiction an	d was completed on (m	no-day-ye	ar)		and th	nis record is	s tru	e to the best of m	y knowled	ge and belief.		
Kansas Water Well Cont	tractor's License No		This W	ater Well	Reco	ord was con	nple	ted on (mo-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.												

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