

WATER WELL RI		W W C-5		1 100		ion of Water			W-11 ID				
Original Record 1 LOCATION OF WA		e in Well U	se	I		rces App. N		Torreshin Numb	Well ID				
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		Ţ.	Township Numb	er Ka	ange Number □ E □ W				
- v	•	74 7		r Duro	1 Addross r	whor	_ ~						
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:				T							
3 LOCATE WELL		ft	5 Latitu	de.			(decimal degrees)						
WITH "X" IN	WITH "A" IN Donth(s) Groundwater Engountered: 1)						8						
SECTION BOX:	ON BOX: 2) ft. 3) ft., or 4) \square 1					Dry Well Datum: □ WGS 84 □ NAD 83 □ NAD 27							
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:								
	below land surface,					nit make/model:)					
NW NE	above land surface, measured on (mo-day-yr)				(
	Pump test data: Well water wasft. afterhours pumpinggpn				☐ Land Survey ☐ Topographic Map								
W X E	Well water was ft.					☐ Online Mapper:							
SWSE	after hours pumping gpi												
	Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC							
S	Bore Hole Diameter:	ft. and	ad Source: Land Survey GPS Topographic Map										
mile	in. to ft. Other												
7 WELL WATER TO BE USED AS:													
1. Domestic:													
Household	6. Dewatering: how many wells?												
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID												
2. Irrigation	8. Monitoring: well ID												
3. ☐ Feedlot	9. Environmental Remediation: wen 1D ☐ Air Sparge ☐ Soil Vapor Extr					b) Open Loop Surface Discharge Inj. of Water							
4. Industrial	☐ Recovery		Injection		-			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													
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)													
								ft Enom	f				
SCREEN-PERFORATED INTERVALS: From													
GRAVEL PACK INTERVALS: From													
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
Nearest source of possible		10., 1 10111 .		. 11. 10		10., 1 10111 .							
☐ Septic Tank	Lateral Line	s \square	Pit Privy		□L	ivestock Per	ıs	☐ Insection	cide Storag	ge			
☐ Sewer Lines	☐ Cess Pool		Sewage La		□F	uel Storage		☐ Abande					
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Stor	age	☐ Oil We	ell/Gas We	11			
☐ Other (Specify)													
			nce from w							NG INTERMALC			
10 FROM TO	LITHOLOG	JIC LUG		FRO	NI .	TO	LIII	HO. LOG (cont.) or	r PLUGGI.	NG INTERVALS			
				Notes	:								
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	ICATIO	N: This v	vater	well was	cor	nstructed, 🔲 reco	onstructed	, or plugged			
under my jurisdiction an	d was completed on (m	no-day-yea	r)		and th	nis record is	s true	e to the best of m	y knowle	dge and belief.			
Kansas Water Well Cont													
under the business name	end one copy to WATER W	ELL OWNE	R and retain	one for you	r record	ds Fee of \$5	00 fo	r each constructed we		• • • • • • • • • • • • • • • • • • • •			
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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