

Original Record		W W C-5	_	1002		ion of Water	1		Wall ID			
		e in Well Us	se			rces App. No		ovenskin Nemk	Well ID	a a Numbar		
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4		4 1/4	Section Number		1	ownship Numb T S		Range Number R		
- v		74 7		r Diiro	1 Addross v	whore						
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:				T						
3 LOCATE WELL		ft	5 Latitu	de.			(decimal degrees)					
WITH "X" IN	L Donth(c) (Proundwater Encountered: 1)											
SECTION BOX:	HON BOA: (2) ft 3) ft or 4)											
N	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:							
	below land surface.	y-yr)		□GF	S (uni	t make/model:)				
NW NE	□ above land surface, measured on (mo-day-yr) Pump test data: Well water was						(WA	AAS enabled?	Yes N	√o)		
								and Survey Topographic Map				
W X E						☐ Online Mapper:						
SW SE	after hours											
	Estimated Yield:					6 Elevat	ion:	on:ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to f									opographic Map		
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	n & Garden 7. ☐ Aquifer Recharge: well ID											
☐ Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?							
2. Irrigation	9. Environmental Remediation: well ID											
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex												
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:												
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
SCREEN-PERFORATED INTERVALS: From												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible		,				ŕ						
☐ Septic Tank	☐ Lateral Line		Pit Privy			ivestock Pen	ıs		cide Storage			
☐ Sewer Lines	Cess Pool		Sewage La			uel Storage			oned Water			
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Stor	age	☐ Oil We	ll/Gas Well			
☐ Other (Specify)												
			nce from w							CINTEDIALC		
10 FROM TO	LITHOLOG	JIC LUG		FRO	IVI	TO 1	LITHC	D. LOG (cont.) of	PLUGGIN	G INTERVALS		
				Notes								
110005												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
under my jurisdiction an	d was completed on (m	no-day-year	r)		and th	is record is	s true 1	to the best of m	y knowled	ge and belief.		
Kansas Water Well Cont	ractor's License No		. This W	ater Well	Reco	rd was com	ipleted	d 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.											
Legith and Department of Health at	ia Liiviioiiiiciit, Buicau 01 V	raici, Ocolog	y occuon, I	ooo a w jac	VPOOH 9	, oui⊯ 4∠0, 1	i opeka,	1xansas 00012-130	77. Terebnon	. 10J-470-330J.		

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