

WATER WELL RI		W W C-5		7000		sion of Water			W-11 ID			
Original Record    1 LOCATION OF WA		e in Well U				rces App. N		Township Numb	Well ID	ana Numban		
	Fraction 1/4 1/4 1/4 1/4			Section Number		Γ	Township Numb T S		Range Number R □ E □ W			
County:  2 WELL OWNER: La		74		r Duro	1 Addragg	whom	_ ~					
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 I atitu	de.			(decimal degrees)					
WITH "X" IN	L Donth(a) (Proundwater Engountered: 1)											
	SECTION BOX: $(1, 2)$ ft or $(1)$											
N	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr)					□GI	PS (u	nit make/model:		)		
NW   NE	above land surface, measured on (mo-day-yr)						(W	/AAS enabled?	Yes 🔲 l	۸o)		
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
WE	afterhours pumpinggp.					Online Mapper:						
SW - <b>X</b> SE	Well water was ft. after hours pumping gp											
	Estimated Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to ft									opographic Map		
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						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:												
☐ 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		,				•						
☐ Septic Tank	Lateral Line		Pit Privy			ivestock Per			cide Storage			
☐ Sewer Lines	☐ Cess Pool		☐ Sewage L			uel Storage			oned Water			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
10 FROM TO	LITHOLOG			FRO				π. IO. LOG (cont.) οι		C INTERVALE		
10 FROM TO	LITHOLOG	ic lug		FRU	IVI	10	LIIF	io. Log (cont.) of	PLUGGIN	GINTERVALS		
				Notes	2.0							
110165												
11 CONTRACTOR'S	OR LANDOWNER'S	CERTI	FICATIO	N: This	water	well was [	l cor	structed 🗆 reco	nstructed	or nlugged		
under my jurisdiction and	d was completed on (m	no-dav-ve	ar)	11113	and th	nis record is	s true	e to the best of m	y knowled	ge and belief.		
Kansas Water Well Cont	tractor's License No		This W	/ater Wel	l Reco	rd was com	iplete	ed on (mo-day-y	ear)			
under the business name of												
KS Department of Health an										e 785-296-3565		
Population of Health all	a Liiviioiiiiciii, Duitau Ol V	, aici, OCOIC	by section, I	TOOD DAY 191	C HOGA	, Duite +20, .	·oher	.u, 1xu11505 00014-130	,,, rerepnon	0,00 270-0000.		

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