

WATER WELL RI		W W C-5		0400		sion of Wate			Wall ID		
Original Record 1 LOCATION OF WA		e in Well U				irces App. N		Torreshin Numb	Well ID	ana Numban	
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		Г	Township Numb		Range Number R □ E □ W		
2 WELL OWNER: La		/4 /		r Diiro	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	4 DEPTH OF COM	IPLETEI	WELL:		ft	5 Latitu	ıde.			(decimal degrees)	
WITH "X" IN	Donth(s) Groundwater Engountared: 1)					8					
SECTION BOX:	2) ft. 3) ft., or 4)							WGS 84 □ NAI			
	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:						
	below land surface,			□Gl	PS (ı	ınit make/model:)			
NW NE	above land surface, measured on (mo-day-yr)				•••••			WAAS enabled?		√o)	
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map						
W Y E	Well water was ft					Online Mapper:					
SW SE			pumpinggpm								
	Estimated Yield:			gpm				n:ft. Ground Level TOC			
S	Bore Hole Diameter: in. to fr				and Source: Land Survey GPS Topographic Map						
mile	in. to ft.							•••••			
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. Public Wa							ld Water Supply: 16			
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 ib ☐ Air Sparge ☐ Soil Vapor Exti					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? \square Yes \square 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)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From											
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible		. 10., 1 10111		. 11. 10		, 110111					
☐ Septic Tank	□ Lateral Line	s \square	Pit Privy		\Box L	ivestock Per	ns	☐ Insection	cide Storage	;	
☐ Sewer Lines	Cess Pool] Sewage L			uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		☐ F	ertilizer Sto	rage	☐ Oil We	ll/Gas Well		
								C.			
Direction from well? 10 FROM TO	LITHOLOG		ance from v	FRO				tt. HO. LOG (cont.) or		C INTERVALE	
10 FROM TO	LITHOLOG	JIC LUG		FKU	IVI	10	LIII	HO. LOG (COIII.) OI	PLUGGIN	GINTERVALS	
				Notes	::	Į.					
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTII	FICATIO	N: This	water	well was	co	nstructed, 🔲 reco	onstructed,	or plugged	
under my jurisdiction an	d was completed on (m	no-day-yea	ar)	· · · · · · · · · · · · · · · · · · ·	and th	nis record is	s tru	e to the best of m	y knowled	ge and belief.	
Kansas Water Well Cont											
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