

WATER WELL		W W C-5	1077	1000		ion of Water	1		W-11 ID		
<u> </u>		ge in Well Use		1		rces App. No		1.1NI1.	Well ID	NI1	
1 LOCATION OF	WATER WELL:	Fraction 1/4 1/4	1/4	1/4	Secti	on Number		nship Numb Γ S	er Ran R	ge Number □ E □ W	
County: 2 WELL OWNER: Last Name:						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					
Business:	First:										
Address:	direction from nearest town or intersection): If at owner's address, check here:									meck nere.	
Address:											
City:	State:	ZIP:									
3 LOCATE WELL	4 DEPTH OF COMPLETED WELL:				ft	t. 5 Latitude:(decimal degrees)					
WITH "X" IN		Depth(s) Groundwater Encountered: 1)				Longitude:					
SECTION BOX:	2) ft. 3) ft., or 4) \square I										
IN .	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr land surface, measured on (mo-day-yr land surface).						GPS (unit make/model:)				
NW X - NE							(WAAS enabled? ☐ Yes ☐ No)				
	Pump test data: Well water wasft.				☐ Land Survey ☐ Topographic Map						
W	after hours pumping gp Well water was ft.					Online Mapper:					
SW SE			pinggpm								
	gpm				6 Elevation :ft. ☐ Ground Level ☐ TOC						
S		in. to ft. and				Source: Land Survey GPS Topographic Map					
1 mile ft.							☐ Other	ſ	•••••		
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. Public Wa										
Household											
☐ Lawn & Garden ☐ Livestock	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID										
2. ☐ Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot						a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	Recovery		_								
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 JOINTS: Glued Clamped Welded Threaded											
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 From	ft to	ft	
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft., From ft. to ft.											
Nearest source of possible contamination:											
☐ Septic Tank	☐ Lateral Line	es 🔲 Pit 1	Privy			ivestock Pen	ıs	☐ Insection	cide Storage		
☐ Sewer Lines	Cess Pool	☐ Sew		goon		uel Storage			oned Water	Well	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
☐ Other (Specify)											
10 FROM TO	LITHOLOG		from w	FROM						G INTERVALS	
10 FROM 10	LITHOLOG	SIC LUG		FROI	VI	10	LII II O. I	OG (cont.) of	PLUGGIN	JINIERVALS	
					-						
										-	
				Notes	 :	L					
11 CONTRACTOR	'S OR LANDOWNER'S	S CERTIFICA	ATION	V: This v	vater v	well was] constru	cted, \square reco	onstructed,	or plugged	
under my jurisdiction	and was completed on (nontractor's License No	no-day-year)			and th	is record is	true to t	he best of m	y knowled	ge and belief.	
Kansas Water Well Co	ontractor's License No	T	his Wa	ater Well	Reco	rd was com	pleted of	n (mo-day-ye	ear)		
under the business nai	ne of	ELL OWNED	d retain	one for you	r record	de Faa of ¢s	00 for 2221	constructed wa			
KS Department of Health	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.										