

WATER WELL RI		W W C-5		3100		ion of Water			W-11 ID			
Original Record 1 LOCATION OF WA		e in Well Us	se	T		rces App. N		Township Numb	Well ID	naa Numban		
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W			
2 WELL OWNER: La	•	74 74		r Diiro	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 I atitu	de.			(decimal degrees)					
WITH "X" IN						8,						
SECTION BOX:	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$											
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	 below land surface, 	-yr)				nit make/model:)				
NW NE	above land surface, measured on (mo-day-yr)						(V	VAAS enabled?	Yes 🔲	No)		
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
W X E	after hours pumping gpn Well water was ft.					☐ Online Mapper:						
SW SE	after hours pumping gpi											
	Estimated Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter:	ft. and	Source: Land Survey GPS Topographic Map									
mile	in. to ft.					☐ Other						
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
☐ Household	6. Dewatering: how many wells?											
☐ Lawn & Garden	<u> </u>											
Livestock	8. Monitoring: well ID											
2. Irrigation	9. Environmental Remediation: well ID							Loop Horizon				
3. Feedlot					l	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 JOINTS: Glued Clamped Welded Threaded												
Casing diameter												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Steinless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) ☐ 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												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Dement 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 La	agoon		uel Storage		· · · · · · · · · · · · · · · · · · ·	oned Water			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well												
Direction from well?								ft				
10 FROM TO	LITHOLOG		iice iioiii w	FRO				HO. LOG (cont.) or		IG INTERVALS		
TO TROM	EITHOLOG	JIC LOG		1 KO	IVI	10	L/111	TO. LOG (cont.) of	TECCOI	IO IIVIERVALD		
Notes:												
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	ICATIO	N: This v	water	well was	coı	nstructed, \square reco	onstructed.	or plugged		
under my jurisdiction an	d was completed on (m	no-day-year	r)		and th	nis record is	s true	e to the best of m	y knowled	lge and belief.		
Kansas Water Well Cont	tractor's License No		. This W	ater Well	Reco	rd was com	ıplet	ed 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 <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