

WATER WELL R ☐ Original Record ☐		W W C-5	1201			ion of Water	1		Well ID		
1 LOCATION OF W.	<u> </u>	e in Well Use Fraction				rces App. No		chin Numb		aga Numbar	
County:	1/4 1/4 1/4 1/4			Section Number			Township Number T S		Range Number R □ E □ W		
2 WELL OWNER: La	First:					Address where well is located (if unknown, distance and					
Business:		rest town or intersection): If at owner's address, check here:									
Address:											
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM	IPLETED W	ELL:		ft	5 Latitu	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				1	t. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I				Dry Well Datum: WGS 84 NAD 83 NAD 27						
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr					□GP	PS (unit make/model:)				
NW NE	above land surface, measured on (mo-day-yr) Pump test data: Well water was				• • • • • •		(WAAS enabled? ☐ Yes ☐ No)				
							Land Survey Topographic Map				
W E	afterhours pumpinggpi Well water wasft.					☐ Online Mapper:					
SW SE	after hours pumping gp.										
	Estimated Yield:gpm					6 Elevation :ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic						
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:	Public Wa					10. 🔲 Oil	Field Wate	er Supply: 10	ease		
☐ Household	6. ☐ Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?					
Livestock		8. Monitoring: well ID									
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Ext				••••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery	xtraction		13. Other (specify):							
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 diameter											
Casing diameter											
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:											
		auze Wrapped				lled Holes		Specify)			
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		π., From	1	π. το		п., From .		п. то	II.		
Septic Tank	E containmation: ☐ Lateral Line	es 🔲 Pit	Privv		ПТ	ivestock Pen	ıç.	□ Insecti	cide Storage		
Sewer Lines	☐ Cess Pool		vage Lag	goon		uel Storage			oned Water		
☐ Watertight Sewer Lin				,		ertilizer Stor	age		ell/Gas Well		
Other (Specify)											
Direction from well?			from we								
10 FROM TO	LITHOLOG	GIC LOG		FROM	1	TO 1	LITHO. LC	OG (cont.) or	r PLUGGIN	G INTERVALS	
				Natara							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Con	Kansas Water Well Contractor's License No										
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.											
KS Department of Health as	nd Environment, Bureau of W	vater, Geology Se	ection, 10	JU SW Jack	son St	t., Suite 420, T	opeka, Kan	sas 66612-136)/. Telephon	÷ /85-296-3565.	