

WATER WELL RI		W W C-5	_	0000		ion of Water			Wall ID			
		e in Well Us	e			rces App. N		Township Numb	Well ID	naa Numban		
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W		
- v	·	74 7		r D1180	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:										check here.		
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:	CHON BOX: (2) ft (3) ft or (4)											
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	Pump test data: Well water was					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map						
WE	after hours				Online Mapper:							
SW SE			ft.									
	Estimated Yield:						tion:	on:ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to									opographic Map		
1 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												
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		ice from v	FRO				π. HO. LOG (cont.) οι		IC INTEDWALS		
10 FROM TO	LITHOLOG	JIC LUG		FKU	IVI	10	LIII	10. LOG (cont.) of	PLUGGIN	O INTERVALS		
				Notes								
110165												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged												
under my jurisdiction an	d was completed on (m	no-dav-vear)	11110	and th	is record is	s tru	e to the best of m	y knowlec	lge and belief.		
Kansas Water Well Cont	ractor's License No		This W	ater Well	Reco	rd was com	nplet	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 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.												
Legith and Department of Health at	ia Liiviioiiiiciit, Buicau 01 V	rater, dedicty	section, I	DOL M C OOO	C HOST	, suite 420, .	rober	xa, 1xansas 00012-130	,, reichiioi	C 103-270-3303.		

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html