

WATER WELL RI		W W C-5	102	1270		ion of Water			Wall ID			
		e in Well Us	se			rces App. N		Township Numb	Well ID	nga Numban		
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4 1/4		4 1/4	Section Number		Γ	Township Numb	er Ra	_		
County: 2 WELL OWNER: La		74 7		r D1100	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:										
3 LOCATE WELL		ft	5 Latitu	de.			(decimal degrees)					
WITH "X" IN												
SECTION BOX:	SECTION BOX: $(1, 2)$ ft or (1)											
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
						□GI	PS (u	nit make/model:)		
NW NE						(WAAS enabled? ☐ Yes ☐ No)						
	Pump test data: Well water was ft.							Land Survey Topographic Map				
W			npinggpm			☐ Online Mapper:						
SW X- SE	rater wasft. pumpinggpmgpm				6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Estimated Yield: Bore Hole Diameter:		in. to ft. and				e: \[\sum_{\text{Land Survey}} \sqrt{\text{GPS}} \sqrt{\text{Topographic Map}} \]					
1 mile												
1 mile in. to ft. Uniter												
1. Domestic: 5. Public Water Supply: well ID												
☐ Household	6. Dewatering: how many wells?											
Lawn & Garden						☐ Cas	sed	☐ Uncased ☐ (Geotechnic	al		
☐ Livestock	8. Monitoring: well ID											
2. Irrigation	9. Environmental Remediation: well ID											
3. Feedlot						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):						
4. Industrial	Recovery	∐ I	njection			13. ∐ Otł	ner (s	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 in. to ft., Diameter in. to ft., Diameter ft.												
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												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible		10, 110111 .		. 10. 00		10, 110111.						
☐ Septic Tank	Lateral Line	s \square	Pit Privy		□L	ivestock Per	ıs	☐ Insection	cide Storage	e		
Sewer Lines	Cess Pool		Sewage La	agoon		uel Storage			oned Water			
☐ Watertight Sewer Line			Feedyard		☐ F	ertilizer Stor	rage	☐ Oil We	ell/Gas Wel	l		
Other (Specify)												
Direction from well?			nce from w									
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LITE	HO. LOG (cont.) or	PLUGGIN	IG INTERVALS		
				NT 4								
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged												
under my jurisdiction an	d was completed on (n	o-day-yee	1CA 1101 r)	IN: I MIS V	water '	wen was L] COI	ustructed, $\ \ \ \ \ $ rect	v knowled	or <u></u> prugged loe and belief		
Kansas Water Well Cont	tractor's License No		. This W	ater Well	Reco	rd was com	nnlet	ed on (mo-day-v	ear)	ige and belief.		
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 ar	d Environment, Bureau of V	Vater, Geolog	y Section, 1	000 SW Jac	ckson S	t., Suite 420, 7	Горек	ka, Kansas 66612-136	Telephor	ie 785-296-3565.		

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