

WATER WELL RI		// W C-5		1070		ion of Water		W-II ID		
<u> </u>		e in Well U Fraction	se			rces App. No		Well ID		
1 LOCATION OF WATER WELL: County:				4 1/4	Section Number		Township Num		ange Number □ E □ W	
2 WELL OWNER: Las		/4 /		r Duro	1 Addross v					
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 4 DEPTH OF COMPLETED WELL:						5 I atitu	do.		(decimal degrees)	
WITH 'A' IN Denth(s) Groundwater Engagntered: 1)					8					
SECTION BOX: ft 3) ft or 4)					Dongitude:(decimar degrees)					
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:					
							S (unit make/model:		)	
NW   NE						(WAAS enabled? ☐ Yes ☐ No)				
	Pump test data: Well water was f					☐ Land Survey ☐ Topographic Map				
W E			mping gpm or was ft.			Online Mapper:				
SW SE	pumping gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	in. to ft. and				Source:   Land Survey GPS Topographic Map					
mile	in. to ft.					□ O41				
7 WELL WATER TO BE USED AS:										
1. Domestic: 5. ☐ Public Water Supply: well ID										
☐ Household	6. Dewatering: how many wells?									
☐ Lawn & Garden	☐ Lawn & 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	☐ Air Sparge		Soil Vapor	Extraction	1		en Loop  Surface I			
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? ☐ Yes ☐ No										
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)										
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL:  Neat cement  Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
☐ Septic Tank	☐ Lateral Line		Pit Privy			ivestock Pen		ticide Storag		
☐ Sewer Lines	Cess Pool		Sewage La			uel Storage		doned Wate		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
10 FROM TO	LITHOLOG		ince from v	FRO			LITHO. LOG (cont.)		NG INTEDVALS	
10 FROM TO	LITHOLOG	nc Log		TRO	IVI	10 1	LITTIO. LOG (cont.)	JI I LUUUI	NO INTERVALS	
				Notes	:					
11 CONTRACTOR'S	OR LANDOWNER'S	CERTIF	TICATIO	N: This v	water	well was	constructed, $\square$ re	constructed	l, or plugged	
under my jurisdiction and was completed on (mo-day-year)										
Kansas Water Well Cont	ractor's License No		This W	ater Well	Reco	rd was com	pleted on (mo-day-	year)		
under the business name	of	ELL OWNE	D 1	C		1- E CAC	00 f1	11		
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.										

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