

WATER WELL RI  ☐ Original Record ☐		W W C-5		0074		sion of Wate			Wall ID		
		e in Well U	se			irces App. N		Township Numb	Well ID	naa Numban	
1 LOCATION OF WATER WELL: County:		Fraction			Section Number		r	Township Numb	er   Ka   R	nge Number □ E □ W	
2 WELL OWNER: La		/4 /		r Diiro	1 Addross	who	_ ~				
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:				1					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	L Donth(c) (Proundwater Encountered: 1)										
SECTION BOX:	ON $\mathbf{DUA}$ : ft or $A$ ) $\Box$										
N	WELL'S STATIC WATER LEVEL:				it. Source for Latitude/Longitude:						
	<ul> <li>below land surface,</li> </ul>	y-yr)			PS (u	ınit 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						
WE	after hours pumping gp: Well water was ft.					Online Mapper:					
SW SE	after hours										
	Estimated Yield:		5			<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter:	ft. and	d Source: ☐ Land Survey ☐ GPS ☐ Topographic Map								
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. Public Wa	ter Supply:	well ID			10. 🔲 Oil	l Fiel	d Water Supply: 16	ease		
☐ Household	6. ☐ Dewatering: how many wells?										
☐ Lawn & Garden	7. Aquifer Recharge: well ID										
Livestock	8. Monitoring: well ID										
2. Irrigation	9. Environmental Remediation: well ID										
3. Feedlot						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     ☐ Stainless 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 Storag		
☐ Sewer Lines	Cess Pool		Sewage L			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		ance mom v	FRO				HO. LOG (cont.) or		JG INTERVALS	
TO TROM	EITHOLOG	JIC LOG		1 KO	IVI	10	LIII	.10. LOG (cont.) of	LUGGII	TO ITTER VILLS	
				Notes	<u> </u>	<u> </u>					
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTII	FICATIO	N: This	water	well was	co	nstructed, $\square$ reco	onstructed	, or plugged	
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Cont	tractor's License No		This W	ater Well	Reco	rd was con	nplet	ted 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.											

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