

WATER WELL R ☐ Original Record ☐		W W C-5	007			on of Water	1		Well ID			
1 LOCATION OF W.	<u> </u>	e in Well Use Fraction				ces App. No		ahin Mumb		n an Mumban		
County:	1/4 1/4 1/4 1/4 1/4			Section Number			Township Number T S		Range Number R □ E □ W			
2 WELL OWNER: La	First:			Duro1	Il Address where well is located (if unknown, distance and							
Business:			n nearest town or intersection): If at owner's address, check here:									
Address:												
Address:												
City:	State:	ZIP:			ı							
3 LOCATE WELL	4 DEPTH OF COMPLETED WELL:					ft. 5 Latitude :(decimal degrees)						
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				Longitude:							
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I											
17	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)						
NW NE					••••							
	Pump test data: Well w		☐ Land Survey ☐ Topographic Map									
W E	after hours			☐ Online Mapper:								
SW SE	Well water was ft. after hours pumping g											
<u> </u>	Estimated Yield:					6 Elevation:ft. ☐ Ground Level ☐ TOC						
S						Source:						
mile	1 mile in. to ft.							☐ Other				
7 WELL WATER TO BE USED AS:												
1. Domestic:		ter Supply: well I										
Household	6. Dewaterin											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Re											
2. Irrigation	8. Monitoring			12. Geothermal: how many bores?								
3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extra ☐ Soil Vapor ☐ Soil ☐ Soil Vapor ☐ Soil ☐				•••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial												
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												
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)												
								Specify)	• • • • • • • • • • • • • • • • • • • •			
	☐ Key Punched ☐ W					ne (Open Ho		t Enom	f	£.		
SCREEN-PERFORATED INTERVALS: From												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		10., 1 10111		to	•••••			11. 10				
☐ Septic Tank	□ Lateral Line	es 🔲 Pit Pri	ivy		☐ Li	vestock Pen	S	☐ Insection	cide Storage	;		
☐ Sewer Lines	☐ Cess Pool	☐ Sewag				iel Storage			oned Water			
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age	☐ Oil We	ll/Gas Well			
☐ Other (Specify)												
10 FROM TO	LITHOLOG		om wei	FROM						IG INTERVALS		
10 FROM 10	LITHOLOG	JIC LUG		FROM		10 1	LITHO. LC	G (cont.) of	PLUGGIN	GINTERVALS		
				Notes:	<u>l</u>							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged												
under my jurisdiction and was completed on (mo-day-year)												
Kansas Water Well Con	tractor's License No	Thi	s Wat	er Well F	Recor	d was com	pleted 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.												