

WATER WELL RI		W W C-5		0210		ion of Water			W-11 ID			
		e in Well Us	se			rces App. N		Township Numb	Well ID	n an Numban		
1 LOCATION OF WATER WELL: County:		Fraction			Section Number		r	Township Numb	er Rai	Range Number R □ E □ W		
2 WELL OWNER: La		/4 /	Street or Rural Address where well is located (if u									
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:										
3 LOCATE WELL	4 DEPTH OF COM	IPLETED	WELL:		ft	5 Latitu	ıde.			(decimal degrees)		
WITH "X" IN	Donth(s) Groundwater Engountered: 1)					8,						
SECTION BOX:	SECTION BOX: 2) ft. 3) ft., or 4) \square					Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27						
	WELL'S STATIC WATER LEVEL:					ft. Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr							nit make/model:)		
NW NE	above land surface,		• • • • • • •			VAAS enabled? □		No)				
	Pump test data: Well water was ft. after hours pumping gp.							and Survey Topographic Map				
E E	Well w			Online Mapper:								
SW SE			ımping gpm									
<u> X </u>	X Estimated Yield:							n:ft. Ground Level TOC				
S	Bore Hole Diameter: in. to f				and Source: Land Survey GPS Topographic Ma							
mile	in. to ft.							•••••				
7 WELL WATER TO BE USED AS:												
1. Domestic:												
Household	6. Dewatering: how many wells?											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID											
2. Irrigation	8. Monitoring: well ID											
3. ☐ Feedlot	□ Air Sparge □ Soil Vapor Extra											
4. ☐ Industrial	☐ Recovery		njection		=			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												
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 PERFORA			. –				_					
☐ 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												
Grout Intervals: From												
Nearest source of possible		10., 1 10111 .		. 10. 00		10., 1 10111 .						
☐ Septic Tank	☐ Lateral Line	s \square	Pit Privy		\Box L	ivestock Per	ns	☐ Insection	cide Storage	•		
☐ Sewer Lines	☐ Cess Pool		Sewage La			uel Storage		· · · · · · · · · · · · · · · · · · ·	oned Water			
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Stor	rage	☐ Oil We	ll/Gas Well			
☐ Other (Specify)												
10 FROM TO	LITHOLOG		nce from v	FRO				1t. HO. LOG (cont.) 01		CINTEDVALC		
10 FROM TO	LITHOLOG	JIC LUG		FRU.	IVI	10	LIII	10. LOG (cont.) of	PLUGGIN	GINTERVALS		
				Notes	::	<u> </u>						
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	ICATIO:	N: This v	water	well was	COI	nstructed, 🗌 reco	onstructed,	or plugged		
under my jurisdiction an	d was completed on (m	no-day-year	r)		and th	is record is	s true	e to the best of m	y knowled	ge and belief.		
Kansas Water Well Cont												
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