

WATER WELL RI ☐ Original Record ☐		W W C-5		0004		sion of Wate			Wall ID			
1 LOCATION OF WA		e in Well U Fraction				irces App. N		Township Numb	Well ID			
	1/4 1/4 1/4 1/4			Section Number		Г	Township Numb	er Ra	nnge Number □ E □ W			
County:		/4 /		r Duro	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:										
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)					
WITH 'A' IN Denth(s) Groundwater Engountered: 1)					8,							
SECTION BOX:	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27						
14	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:							
	below land surface,		GPS (unit make/model:))				
NW NE	above land surface, measured on (mo-day-yr)							WAAS enabled?				
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map							
W E	afterhours pumpinggpi Well water wasft.					☐ Online Mapper:						
SW SE	after hours pumping											
	Estimated Yield:gpm				6 Elevation :ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter:	ft. and	Source: Land Survey GPS Topographic Map									
mile			☐ Other									
7 WELL WATER TO BE USED AS:												
1. Domestic:	5. Public Wa							ld Water Supply: 16				
Household	6. Dewatering: how many wells?											
Lawn & Garden	<u> </u>											
Livestock	8. Monitoring: well ID											
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extr					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial	☐ Recovery		Injection	Extraction	1							
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 diameter												
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 ft. to ft., From ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
		. ft., From		. ft. to		ft., From .	• • • • •	ft. to	ft.			
Nearest source of possible			□ Die Dairer		Πт	iveate als Da		□ Inconti	aida Stanaa			
☐ Septic Tank ☐ Sewer Lines	☐ Lateral Line☐ Cess Pool] Pit Privy] Sewage L	agoon		Livestock Per Fuel Storage		☐ Insection ☐ Abando				
☐ Watertight Sewer Line						Fertilizer Sto						
□ 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			FRO				HO. LOG (cont.) or		NG INTERVALS		
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
11 CONTRACTOR'S	UK LANDOWNER'S	S CERTI	FICATIO	N: This	water	well was	_ co	nstructed, ∐ reco	onstructed	, or ∐ plugged		
under my jurisdiction and Kansas Water Well Cont	u was completed on (m	ю-аау-уе	аг) Тыс W	Vator Wall	ana th	ins record i	s tru	ted on (mo day w	y knowle	age and belief.		
under the business name of												
		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