

WATER WELL RI		W W C-5		2040		ion of Wate	- 1		W-11 ID		
		e in Well Us	se			rces App. N		Torreshin Numb	Well ID	a Numban	
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4			Section Number		Г	Township Numb		Range Number R □ E □ W	
- v		/4 /		r Duro	1 Addross v	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:										check here.	
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "A" IN Donth(s) Groundwater Engountered: 1)					8,						
SECTION BOX:	SECTION BOX: 2) ft. 3) ft., or 4)					Dry Well Datum: □ WGS 84 □ NAD 83 □ NAD 27					
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr)					□GI	PS (ι	ınit make/model:)	
NW NE	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map					10)	
	Pump test data: Well water was										
E E	after hours pumping gp Well water was ft.					☐ Online Mapper:					
SW SE	after hours										
								n:ft. Ground Level TOC			
	Bore Hole Diameter: in. to f				nd Source: Land Survey GPS Topographic Ma						
mile						☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. Dublic Water Supply: well ID											
Household	6. ☐ Dewatering: how many wells?										
☐ Lawn & Garden ☐ Livestock	– 1										
2. Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot											
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		,				,					
☐ Septic Tank	□ Lateral Line	s 🔲	Pit Privy		\Box L	ivestock Per	ns	☐ Insection	cide Storage	;	
☐ Sewer Lines	☐ Cess Pool		Sewage L			uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		☐ F	ertilizer Sto	rage	☐ Oil We	ll/Gas Well		
☐ Other (Specify)											
10 FROM TO	LITHOLOG		nce from v	FRO				tt. HO. LOG (cont.) or		CINTEDVALC	
10 FROM TO	LITHOLOG	JIC LUG		FRU	IVI	10	LIII	HO. LOG (COIII.) OI	PLUGGIN	GINTERVALS	
					-						
				Notes	S:						
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	ICATIO	N: This	water	well was	co	nstructed, 🔲 reco	onstructed,	or plugged	
under my jurisdiction an	d was completed on (m	no-day-year	·)		and th	nis record is	s tru	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