

WATER WELL RI		// W C-5	Tan	1022		sion of Wate			Wall ID		
		e in Well U	ise			irces App. N		Torreshin Numb	Well ID	a Numban	
1 LOCATION OF WATER WELL: County:		Fraction		/ <sub>4</sub> 1/ <sub>4</sub>	Section Number		Г	Township Numb		Range Number R □ E □ W	
- v		74 7		r Direc	1 Addraga	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 Depth(s) Groundwater Encountered: 1)											
SECTION BOX:	SECTION BOX: ft or 4)										
N	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:						
							PS (ı	ınit make/model:		)	
NW NE							(V	WAAS enabled?   □	Yes \[ \] N	√o)	
	Pump test data: Well water was ft.  afterhours pumping gpr  Well water was ft.							Survey  Topographic Map			
W E							☐ Online Mapper:				
SW SE	after hours				-						
	Estimated Yield:					6 Eleva	tion	on:ft. ☐ Ground Level ☐ TOC			
S	Bore Hole Diameter: in. to f									opographic Map	
1 mile			Other								
1 mile  in. to ft. Uniter											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. Dewatering: how many wells?										
☐ Lawn & Garden	Garden 7. Aquifer Recharge: well ID										
☐ Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?						
2.  Irrigation	9. Environmental Remediation: well ID										
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext					1	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 diameter											
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)											
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible		,				,					
☐ Septic Tank	Lateral Line		Pit Privy			ivestock Per			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)											
			ance from v							CINTEDIALC	
10 FROM TO	LITHOLOG	JIC LOG		FRO	M	TO	LIII	HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
				+							
				+							
				Notes	3.						
110005											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction an	d was completed on (m	io-dav-vea	ır)		and th	nis record is	s tru	e to the best of m	y knowled	ge and belief.	
Kansas Water Well Cont	tractor's License No		This W	ater Well	Reco	ord 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.											
Legith and Department of Health at	a Lavironnicht, Dureau Or V	aici, 00010}	5y occuon, I	OUU D W Ja	C HOGY	, Duite 420,	Tobe	na, mansas 00014-150	77. Telepholi	. 10J-470-330J.	

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