

WATER WELL R ☐ Original Record ☐		W W C-5	1002			ion of Water	I		Well ID		
	<u> </u>	e in Well Use Fraction				rces App. No		mahin Numb		nga Numbar	
1 LOCATION OF WATER WELL:				1/4	Section Number			Township Number		Range Number R	
County: 2 WELL OWNER: La	First:		-	Duro	1 Addross v	Address where well is located (if unknown, distance and					
Business:		rest town or intersection): If at owner's address, check here:									
Address:											
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM	IPLETED WE	ELT:		ft	5 Latitu	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					. ft. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 1										
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	☐ below land surface, measured on (mo-day-yr					GPS (unit make/model:)					
NW NE	above land surface, measured on (mo-day-yr				• • • • •	(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
W E	after hours pumping gp Well water was ft.					Online Mapper:					
SW SE	after hours pumping gp					6 Elevation:ft. Ground Level TOC					
	Estimated Yield:	8F									
S	Bore Hole Diameter: in. to				t. and Source: Land Survey GPS Topograp						
mile						Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:	Public Wa										
Household	6. Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID							Jncased 🔲			
Livestock	8. Monitoring: well ID										
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Ext				••••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery	Attaction		13. Other (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											
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:											
		auze Wrapped						(Specify)			
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		π., From	I	τ. το		п., From .		II. to	II.		
Septic Tank	□ Lateral Line	es 🔲 Pit I	Privv		ПТ	ivestock Pen	ıs.	□ Insectio	cide Storage	2	
Sewer Lines	☐ Cess Pool	□ Sew		oon		uel Storage			oned Water		
☐ Watertight Sewer Lin				,		ertilizer Stor	age		ll/Gas Well		
Other (Specify)											
Direction from well?			from we								
10 FROM TO	LITHOLOG	GIC LOG		FROM	1	TO 1	LITHO. I	LOG (cont.) or	PLUGGIN	IG INTERVALS	
				NT 4							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Con	tractor's License No.	Ti	his Wat	ter Well	Reco	rd was com	pleted o	n (mo-dav-v	ear)	50 and benen.	
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.											
KS Department of Health a	nd Environment, Bureau of W	Vater, Geology Sec	ction, 100	00 SW Jack	son St	t., Suite 420, 7	Topeka, Ka	ınsas 66612-136	7. Telephon	e 785-296-3565.	