

WATER WELL R ☐ Original Record ☐		W W C-5	1200			ion of Water			Well ID									
	<u> </u>	ge in Well Use Fraction				rces App. No		orren alaim Mannala		a Number								
1 LOCATION OF WATER WELL: County:				1/4	Section Number		10	ownship Numb T S		Range Number R								
2 WELL OWNER: La	First:			Duro	al Address where well is located (if unknown, distance and													
Business:		nearest town or intersection): If at owner's address, check here:																
Address:																		
Address:																		
City:	State:	ZIP:				1												
3 LOCATE WELL	4 DEPTH OF COM	PLETED WE	T.I.:		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) 🗆 I				Dry Well Datum: \(\subseteq \text{WGS 84} \) \(\subseteq \text{NAD 83} \) \(\subseteq \text{NAD 27} \)													
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:													
	☐ below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr)					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)												
NW NE					• • • • •													
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map													
W E	afterhours pumpinggpi Well water wasft.					Online Mapper:												
SW SE	after hours pumping gp.																	
	Estimated Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC												
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topog													
mile						☐ Other												
7 WELL WATER TO BE USED AS:																		
1. Domestic:		iter Supply: well						Water Supply: 16										
☐ Household	6. ☐ Dewatering: how many wells?																	
Lawn & Garden	7. Aquifer Recharge: well ID																	
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 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																		
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)																		
	☐ Key Punched ☐ W					ne (Open Ho												
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft., From ft.																		
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft.																		
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other																		
Nearest source of possible		It., From	1	t. to		It., From .	• • • • • • • • • • • • • • • • • • • •	It. to	It.									
Septic Tank	E containmation: ☐ Lateral Line	es 🔲 Pit F	Privv		Пт	ivestock Pen	ıç	☐ Insectio	cide Storage									
Sewer Lines	☐ Cess Pool	☐ Sew		oon		uel Storage	1.5		oned Water									
☐ Watertight Sewer Lin						ertilizer Stor	age		ll/Gas Well									
Other (Specify)																		
Direction from well?			rom we															
10 FROM TO	LITHOLOG	GIC LOG		FROM	1	TO 1	LITHO	. LOG (cont.) or	PLUGGIN	G INTERVALS								
				N7 (
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 Contractor's License No																		
under the business name	e 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 a	nd Environment, Bureau of W	Vater, Geology Sec	tion, 100	00 SW Jack	son St	., Suite 420, T	Topeka,	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.										