

WATER WELL R ☐ Original Record ☐		W W C-5	1200			ion of Water			Well ID		
	<u> </u>	e in Well Use Fraction				rces App. No		Mumbo		ga Numbar	
1 LOCATION OF WATER WELL: County:		1/4 1/4 1/4		1/4	Section Number		1	Township Number		Range Number R	
2 WELL OWNER: La			-	Durol	1 Addross v	_					
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	4 DEPTH OF COM	IPLETED WE	ELL:		. 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										
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:)					
NW NE							(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	well water was ft. after hours pumping gp										
	Estimated Yield:	-Pili		6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic I						
mile		ft.	☐ Other								
7 WELL WATER TO BE USED AS:											
1. Domestic:		ter Supply: well					Field Water Sup				
Household	6. Dewatering: how many wells?										
Lawn & Garden		echarge: well ID					ed Uncased				
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 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)											
	☐ Key Punched ☐ W					ne (Open Ho					
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		π., From	I	τ. το		п., From .	II. to	• • • • • • • • • • • • • • • • • • • •	п.		
Septic Tank	E containmation: ☐ Lateral Line	es 🔲 Pit F	Privv		□ I i	ivestock Pen	s □1	nsectici	ide Storage		
Sewer Lines	☐ Cess Pool	□ Sew				uel Storage			ned Water V	Well	
☐ Watertight Sewer Lin						ertilizer Stor			l/Gas Well		
Other (Specify)											
Direction from well?			rom we								
10 FROM TO	LITHOLOG	GIC LOG		FROM	1	TO 1	LITHO. LOG (co	ont.) or	PLUGGING	3 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	Kansas Water Well Contractor's License No										
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	tion, 100	00 SW Jack	son St	., Suite 420, T	Topeka, Kansas 666	12-1367	7. Telephone	785-296-3565.	