

WATER WEI			WWC-5 1310	D.	vision of Wate				
					sources App. N				
1 LOCATION OF WATER WELL: County:			Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$		Section Number Township N		$\begin{array}{c c} & Range Number \\ R & \square E \square W \end{array}$		
County: 1/4 1/4 1/4 1/4 T S R E W 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and									
Business:	LIN, La	st Ivallie.	11180.		from nearest town or intersection): If at owner's address, check here:				
Address:									
Address:									
City: State: ZIP: 3 LOCATE WELL 4 DEPTH OF GOVERNMENT 6									
WITH "X" IN 4 DEPTH OF COMPLETED WELL:					ft. 5 Latitu	ıde:	(decimal degrees		
SECTION BOX. Depth(s) Groundwater Encountered: 1)						Longitude:(decimal degrees)			
2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL:									
below land sur						Source for Latitude/Longitude: GPS (unit make/model:) (WAAS enabled? Yes No) Land Survey Topographic Map			
			, measured on (mo-day-						
			vater was f	t.					
W X E after			s pumping			Online Mapper:			
CW CE			vater was f						
Estimated Yield:			s pumping			tion :ft	. 🗌 Ground Level 🔲 TOO		
			gpin in. to	ft. and		Source: Land Survey GPS Topographic Map			
1 mile			in. to	. in. to ft.					
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. Public Water Supply: well ID									
☐ Household 6. ☐ Dewatering: how many									
Lawn & Garde	□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. □ Monitoring: well ID					Cased Uncased Geotechnical			
2. [] Irrigation 9. Environmental Remediation: well ID									
				xtraction 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? \square Yes \square No									
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded									
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
Steel 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)									
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. o ft. to ft. to ft.									
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage									
Seper Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well									
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well									
Other (Specify) Direction from well? ft.									
10 FROM TC		LITHOLO		FROM			r PLUGGING INTERVAL		
	,	LIIIOLO		TROM	10		I LOODING INTERVAL		
Notes:									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged									
under my jurisdict	under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.								
Kansas Water We	Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year) under the business name of								
under the business	s name	of			1 1 0 0 * -		11		
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.									
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212									