

WATER WELL RI  ☐ Original Record ☐		// W C-5		5115		sion of Water			Wall ID		
		e in Well U	Jse			rces App. N		Township Numb	Well ID	naa Numban	
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W	
County:  2 WELL OWNER: Las		/4 /		r Diiro	1 Addross v	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:				T					
3 LOCATE WELL	4 DEPTH OF COM	PLETEI	WELL:		ft	5 Latitu	ıde.			(decimal degrees)	
WITH "A" IN Donth(s) Groundwater Engountered: 1)					8,						
SECTION BOX: 2) ft., or 4)					Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27						
IN .	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)							ınit make/model:		)	
NW   NE								VAAS enabled?		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 g										
	Estimated Yield:gpm			. 8P		<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to fr				Source: Land Survey GPS Topographic Map						
mile	in. to ft.							Other		• • • • • • • • • • • • • • • • • • • •	
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. 🔲 Public Wa							d Water Supply: 16			
Household											
☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID											
☐ Livestock 2. ☐ Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot											
4. ☐ Industrial	☐ Recovery		Injection	Laudenor	•			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 in. to											
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)											
□ 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.											
Grout Intervals: From											
Septic Tank	Lateral Line	s Г	] Pit Privy		ПΙ	ivestock Per	ns	☐ Insection	cide Storag	e	
Sewer Lines	Cess Pool		Sewage L	agoon		uel Storage			oned Water		
	☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)											
			ance from v							IG DIFFEDITAL C	
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LITI	HO. LOG (cont.) or	PLUGGI	GINTERVALS	
					-						
					-						
					-						
				Notes	,.						
11063.											
11 CONTRACTOR'S	OR LANDOWNER'S	CERTI	FICATIO	N: This v	water	well was $\Gamma$	CO	nstructed. $\square$ reco	onstructed	or nlugged	
under my jurisdiction and	d was completed on (m	o-day-yea	ar)		and th	nis record is	s tru	e to the best of m	y knowled	dge and belief.	
Kansas Water Well Cont	ractor's License No		This W	ater Well	Reco	rd was con	nplet	ted on (mo-day-y	ear)		
under the business name	of	ELL OVE				1 12 0.0-			11		
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.											

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html