

WATER WELL R		W W C-5		2107		ion of Water			Wall ID		
Original Record 1 LOCATION OF WA		e in Well U	se			rces App. N		Township Numb	Well ID	naa Numban	
	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb	er Ka R	Range Number R □ E □ W		
County:		74 7		r D1180	1 Addragg	whor	- ~				
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:				Т					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	Donth(s) Groundwater Engountered: 1)										
SECTION BOX:	$\frac{10 \text{N BOX:}}{\text{N}}$ 2) ft. 3) ft., or 4) \square 1					Dry Well Datum: □ WGS 84 □ NAD 83 □ NAD 27					
1	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:						
	below land surface,			□Gl	PS (u	ınit make/model:)			
NW NE X	above land surface, measured on (mo-day-yr)				• • • • • • • • • • • • • • • • • • • •			VAAS enabled? □		No)	
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map						
E E	after hours pumping gp Well water was ft.					☐ Online Mapper:					
SW SE	after hours										
	Estimated Yield:			· 6F				on:ft. Ground Level TOC			
S	Bore Hole Diameter: in. to ft				d Source: Land Survey GPS Topographic Map						
mile	in. to ft.										
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. Public Wa							ld Water Supply: 16			
Household	6. Dewatering: how many wells?										
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID										
2. Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot											
4. ☐ Industrial	☐ Recovery		Injection		-			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 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											
Grout Intervals: From											
Nearest source of possible		16., 1 10111 .		. 10. 10		10, 110111					
☐ Septic Tank	□ Lateral Line	s \square	Pit Privy		\Box L	ivestock Per	ns	☐ Insection	cide Storag	e	
☐ Sewer Lines	☐ Cess Pool		Sewage L			uel Storage			oned Water		
☐ Watertight Sewer Lin			Feedyard		☐ F	ertilizer Stor	rage	☐ Oil We	ll/Gas Wel	l	
								C.			
Direction from well? 10 FROM TO	LITHOLOG		nce from v	FRO:				π. HO. LOG (cont.) οι		IC INTEDVALS	
10 FROM 10	LITHOLOG	JIC LUG		FRU.	IVI	10	LIII	no. Log (cont.) of	PLUGGII	NG INTERVALS	
				Notes	:						
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	ICATIO	N: This v	water	well was	co	nstructed, 🔲 reco	onstructed	, or plugged	
under my jurisdiction an	d was completed on (m	no-day-yea	r)		and th	is record is	s tru	e to the best of m	y knowled	lge and belief.	
Kansas Water Well Cont											
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.										

KSA 82a-1212