

WATER WELL R. ☐ Original Record ☐		W W C-5	0140			on of Water			Well ID		
1 LOCATION OF W	<u> </u>	e in Well Use Fraction				rces App. No		Sarrymahin Mumb		n aa Numban	
County:	1/4 1/4 1/4 1/4 1/2			Section Number		1	Township Number T S		Range Number R □ E □ W		
2 WELL OWNER: La	First:			Duro1	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:				Т					
3 LOCATE WELL	4 DEPTH OF COM		ft. 5 Latitude :(decimal degrees)								
WITH "X" IN	Depth(s) Groundwater Encountered: 1)										
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I										
17	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)					
NW NE	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map					No)	
	Pump test data: Well water wasft. afterhours pumpinggp										
W E				☐ Online Mapper:							
SW SE	Well water was ft. after hours pumping gp										
	Estimated Yield:	P		6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter: in. to f				and Source: Land Survey GPS Topograp						
mile	in. to ft.						☐ Other				
7 WELL WATER TO BE USED AS:											
1. Domestic:		ter Supply: well I						Water Supply: 16			
Household	6. Dewaterin										
☐ Lawn & Garden ☐ Livestock	7. Aquifer Re										
2. Irrigation	8. Monitoring: well ID							how many bores			
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	·					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 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:											
								her (Specify)			
	☐ Key Punched ☐ W					ne (Open Ho		6 F	C	C.	
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		It., FIOIII	11	. 10	• • • • • • • • • • • • • • • • • • • •	It., FIOIII .	• • • • • • •	11. 10	11.		
Septic Tank	Lateral Line	es 🔲 Pit Pr	ivv		□Li	vestock Pen	ıs	☐ Insection	cide Storag	e	
☐ Sewer Lines	Cess Pool	☐ Sewa				iel Storage			oned Water		
☐ Watertight Sewer Lin		☐ Feedy	ard		☐ Fe	ertilizer Stor	age	☐ Oil We	ll/Gas Wel	l	
☐ Other (Specify)											
			om wel								
10 FROM TO	LITHOLOG	FIC LOG		FROM		TO	LITH	D. LOG (cont.) of	PLUGGIN	NG INTERVALS	
				Notes:							
110005											
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	tractor's License No	Thi	s Wat	er Well F	Recor	rd was com	plete	d on (mo-day-y	ear)		
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.										
Les Department of Health at	La La vironincia, Dureau Ol V	, a.c.i, Ocology Secti	JII, 100	O D IT JACKS	, on 3t.	., 5010 +20, 1	орска	, 1	,,. rerepnoi	705 270-3303.	