

WATER WELL RI		W W C-5	_	0017		ion of Water			W-11 ID		
		e in Well Us	se			rces App. N		Torringhin Mumb	Well ID	n an Mumban	
1 LOCATION OF WATER WELL: County:		Fraction			Section Number		r	Township Numb T S		Range Number R □ E □ W	
- v		74 7		r D1180	1 Addross r	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:										check here.	
Address:											
City:	State:	ZIP:				T					
3 LOCATE WELL		ft	5 I atitu	de.			(decimal degrees)				
WITH "X" IN	L Donth(a) (Proundwater Encountered: 1)					8,					
SECTION BOX: ft or 4)											
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
						□GI	PS (u	nit make/model:)	
NW NE								(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft. after hours pumping gpr Well water was ft.							d Survey			
WE						Online Mapper:					
SW SE			oumping gpm								
11.1.1.1	Estimated Yield:						tion:	n:ft. 🔲 Ground Level 🔲 TOC			
S	Bore Hole Diameter: in. to										
1 mile			D 04h - ::								
1 mile in. to ft. Uniter											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. Dewatering: how many wells?										
Lawn & Garden											
☐ Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?						
2. Irrigation	9. Environmental Remediation: well ID										
3. ☐ Feedlot						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):					
4. Industrial	Recovery	Li	njection			13. ∐ Otł	ner (s	pecify):			
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 ft., Diameter ft., Diameter ft.											
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)											
								other (Specify)	• • • • • • • • • • • • • • • • • • • •		
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft.											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other											
Grout Intervals: From										•••••	
Nearest source of possible		10., 1 10111		. 11. 10		10., 1 10111 .					
Septic Tank	☐ Lateral Line	s 🔲	Pit Privy		□L	ivestock Per	ıs	☐ Insection	cide Storage	2	
Sewer Lines	Cess Pool		Sewage L	agoon		uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Stor	rage	☐ Oil We	ll/Gas Well		
Other (Specify)											
Direction from well?			nce from v								
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LITH	HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
				NT 4							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction an	d was completed on (n	o-day-vesi	ICATIU: ·)	14: 1 ms /	water ' and th	wen was L	J COI	isuucieu, 🔛 reco	nistructed, v knowled	or □ prugged oe and helief	
Kansas Water Well Cont	tractor's License No		. This W	ater Well	Reco	rd was com	nolet	ed on (mo-day-v	ear)	ge and belief.	
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 ar	d Environment, Bureau of V	Vater, Geology	y Section, 1	000 SW Jac	kson S	t., Suite 420, 7	Topek	a, Kansas 66612-136	7. Telephon	e 785-296-3565.	

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