

WATER WELL RI		WWC-5		5000		ion of Water			Wall ID			
		e in Well Use	1	T		rces App. N		Township Numb	Well ID	naa Numban		
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4 1/4		4 1/4	Section Number		r	Township Numb		Range Number R □ E □ W		
- v		/4 /2		r Duro	1 Addross v	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	de.			(decimal degrees)					
WITH "X" IN	WITH "A" IN  Denth(s) Groundwater Engagement (1)					8						
SECTION BOX:	2) ft. 3) ft., or 4) $\square$ I				ry Well Datum: □ WGS 84 □ NAD 83 □ NAD 27							
1	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface,			□GI	PS (u	ınit make/model:		)				
NW   NE	above land surface, measured on (mo-day-yr)				• • • • • • • • • • • • • • • • • • • •			VAAS enabled?   □		No)		
	Pump test data: Well water was ft.  after hours pumping				☐ Land Survey ☐ Topographic Map							
E E	Well water was ft.					☐ Online Mapper:						
SW   S\( \overline{\pi} \)	after hours pumping gp											
	Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC							
S	Bore Hole Diameter:	ft. and	Source: Land Survey GPS Topographic Map									
mile	in. to ft.								• • • • • • • • • • • • • • • • • • • •			
7 WELL WATER TO BE USED AS:												
1. Domestic:	5. Public Water Supply: well ID											
Household	6. Dewatering: how many wells?											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID											
2. Irrigation	8. Monitoring: well ID											
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extr					b) Open Loop  Surface Discharge  Inj. of Water						
4. ☐ Industrial	☐ Recovery		jection					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 in. Weightlbs./ft. Wall thickness or gauge No												
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												
Nearest source of possible		,				,						
☐ Septic Tank	Lateral Line		it Privy			ivestock Per			cide Storage			
Sewer Lines	Cess Pool		ewage La	agoon		uel Storage			oned Water			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
10 FROM TO	LITHOLOG		ze mom w	FRO				HO. LOG (cont.) 01		IC INTERVALS		
TO TROM	EITHOLOG	one Lou		1 KO	IVI	10	L/111	110. EOG (cont.) of	LUGGII	IO IIVIERVALD		
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFIC	CATIO	N: This v	water	well was	co	nstructed, reco	onstructed.	or plugged		
under my jurisdiction an	d was completed on (m	no-day-year)	This W	otor W/-11	and th	ns record is	s tru	e to the best of m	y knowled	ge and belief.		
Kansas Water Well Cont												
under the business name of												
KS Department of Health ar										ie 785-296-3565.		

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