

Original Record		W W C-5		0224		sion of Wate			Wall ID		
1 LOCATION OF WA		e in Well U Fraction	ise			irces App. N		Township Numb	Well ID	naa Numban	
County:	1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W		
2 WELL OWNER: La		74 7		r Direc	1 Addraga	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:				1					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN Depth(s) Groundwater Encountered: 1)					8,						
SECTION BOX:	SECTION BOX: ft or 4)					Bongroude:(decimal degrees)					
N	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:						
	 below land surface, 	y-yr)			PS (u	ınit make/model:)			
NW NE	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map					No)	
	Pump test data: Well water was ft.										
WE	after hours pumping gpr					Online Mapper:					
SW XSE	Well water was ft. after hours pumping gpi										
	Estimated Yield:gpm				6 Elevati			on:ft. ☐ Ground Level ☐ TOC			
S	Bore Hole Diameter: in. to ft										
1 mile				Other							
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	☐ Air Sparge		Soil Vapor	Extraction	1			oop Surface Di			
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (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											
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											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.											
Grout Intervals: From											
Nearest source of possible		,				,					
☐ Septic Tank	Lateral Line		Pit Privy			ivestock Per			cide Storag		
Sewer Lines	Cess Pool		Sewage L			uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		☐ F	ertilizer Sto	rage	☐ Oil We	ll/Gas Wel	l	
Other (Specify)								C.			
Direction from well?			ance from v							IC INTERNAL C	
10 FROM TO	LITHOLOG	alc LOG		FRO	M	TO	LIII	HO. LOG (cont.) or	PLUGGI	GINTERVALS	
					-						
					-						
				Notes	٠.						
110165.											
11 CONTRACTOR'S	OR LANDOWNER'S	CERTII	TICATIO	N. This	water	well was F	1 co	nstructed \square reco	nstructed	or nlugged	
under my jurisdiction an	d was completed on (m	no-dav-vea	r)	1110	and th	nis record i	s tru	e to the best of m	v knowlea	ige and belief.	
Kansas Water Well Cont	ractor's License No		This W	ater Wel	Reco	ord was con	nplet	ted 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.										
KS Department of Health ar	a Environment, Bureau of V	vater, Geolog	gy Section, l	JUU SW Ja	ckson S	t., Suite 420,	1 opeł	ka, Kansas 66612-136	7. Telephor	ie /85-296-3565.	

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