

WATER WELL R  ☐ Original Record ☐		WWC-5	2022			on of Water			Well ID		
1 LOCATION OF W	<u> </u>	ge in Well Use Fraction				ces App. No		ownship Numb		nga Numbar	
County:	1/4 1/4 1/4 1/4 1/4			Section Number		10	Township Number T S		Range Number R □ E □ W		
2 WELL OWNER: La	First:			Durol	al Address where well is located (if unknown, distance and						
Business:			n nearest town or intersection): If at owner's address, check here:								
Address:											
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM	PLETED WE	LL:		ft	5 Latitu	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					ft. 5 Latitude:(decimal degrees) Longitude:(decimal degrees)					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I										
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:					(IID 27	
	below land surface, measured on (mo-day-y					GPS (unit make/model:)					
NW NE	NE above land surface, measured on (mo-day-y					(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map						
W E	after hours pumping gp. Well water was ft.					☐ Online Mapper:					
SW   SE	after pours pumping gp										
	Estimated Yield:		or		6 Elevation:ft. Ground Level TOC						
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topograp						
mile	·								,		
7 WELL WATER TO BE USED AS:											
1. Domestic:		iter Supply: well						Water Supply: 16			
Household	6. ☐ Dewatering: how many wells? 7. ☐ Aquifer Recharge: well ID										
☐ Lawn & Garden ☐ Livestock				☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores?							
2. Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extr				•••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery		_					ecify):			
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 in. Weight lbs./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)											
						lled Holes ne (Open Ho		ner (Specify)		•••••	
	☐ Key Punched ☐ W							ft From	ft to	, ft	
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
Grout Intervals: From											
Nearest source of possible		,				,					
☐ Septic Tank	□ Lateral Line				☐ Li	vestock Pen	ıS		cide Storage		
☐ Sewer Lines	Cess Pool	☐ Sewa				iel Storage			oned Water		
	☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)											
10 FROM TO	LITHOLOG		om we	FROM						IG INTERVALS	
TO TROM TO	LITHOLOG	SIC LOG		TROW	L	10	LITTIO	. LOG (cont.) of	LUGGIN	O INTERVALS	
				Notes:	<u> </u>						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was $\square$ constructed, $\square$ reconstructed, or $\square$ plugged											
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Con	tractor's License No	Th	ıs Wat	er Well I	Recor	d was com	pleted	on (mo-day-ye	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.											