WATER WELL R Original Record		Form WWC			ision of Wate urces App. N			Well ID		
1 LOCATION OF W.					tion Number		Township Number Range Number			
County: M	opis	5W1/	15W1/45W1/4	1/4	8		T /6/8	R 8	E U W	
2 WELL OWNER: Last Name: Street or Rural Address where well is located (if unknown, distance and										
Address: 440 N. Reloe RI. 1. THIT-6 COUNCIL GIOUS GITY LAKE										
Address: Goodand State: KS ZIPS 7052										
3 LOCATE WELL										
WITH "X" IN	4 DEPTH	ft. 5 Latitude:								
SECTION BOX:	Depth(s) Gro		ft. Longitude:							
N	WELL'S ST	ATIC WATER LI	EVEL:	ft.	Sourc		tude/Longitude			
		r)	/							
NWNE	above la Pump test da) (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map								
W E	after	pm	Online Mapper:							
SW SE	Well water was ft. after hours pumping y gpm									
X	Estimated Y	pm	6 Elevation:ft. Ground Level TOC							
S	Bore Hole D	ield: 12gp	ft. and	Source: Land Survey GPS Topographic Map						
1 mile in. to ft. Uniti										
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID										
Household	6. Dewatering: how many wells?									
Lawn & Garden	7. 🗆	Aquifer Recharge		\square C	ased \square	Uncased 🔲 0	Geotechnica	1		
Livestock		Monitoring: well				now many bores				
2. ☐ Irrigation 3. ☐ Feedlot		vironmental Remo Air Sparge	traction		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 Yes If yes, date sample was submitted:										
Water well disinfected? My Yes 🔲 No										
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other										
Casing diameter										
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 L Key Punched L Wire Wrapped L Saw Cut L None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Nearest source of possible contamination:										
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy					☐ Livestock Pens ☐ Insecticide Storage					
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
Other (Specify)										
Direction from well?										
10 FROM TO	+ 1 1 7	ITHOLOGIC L	OG	FROM	TO	27		, ,	GINTERVALS	
2	108 38, C	1 tall		105	112	Coffy C	-000			
2 17	Brown !	p y		11/2	100	Danie	Torl	1.174.	1.0	
17 39	Proun Shote			110	120	DAFK	1914 01	Y SHO	46	
38 47	YCHOW S	ball			101					
55 69	erly Dity Shall			TA.T.						
38 69	Notes:									
672 803	LIMITON.	one I								
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) 3 28 And this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 4.5. This Water Well Record was completed on (mo-day-year) 4.22. 1.2019. under the business name of Fall (man. 1864) 19. 19. 19.										
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment. Bureau of Water. Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367, Telephone (785) 296-3565.										
I Department of He	ealth and Environm	ent Bureau of Water (ientogy Section 1000 S	sw Jackson St	Suite 420. Tone	Ka. Kansas 6	6612-1367. Teleph	one (785) 296-	3303.	

KSA 82a-1212

Visit us at http://www.kdheks.gov/waterwell/index.html

Revised 9/10/2012