

WATER WELL R ☐ Original Record ☐		W W C-5	1200			ion of Water			Well ID			
1 LOCATION OF W		e in Well Use Fraction				rces App. No		Numbe		ga Numbar		
County:	1/4 1/4 1/4 1/4			Section Number			Township Number T S		Range Number R			
2 WELL OWNER: La				Durol	l Address where well is located (if unknown, distance and							
Business: Address: direction from nearest town or intersection): If at owner's address, check here:												
Address:												
City:	State:	ZIP:				1						
3 LOCATE WELL	4 DEPTH OF COM	IPLETED WE	II:		ft	5 Latitud	de.			(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					t. 5 Latitude:(decimal degrees) Longitude:(decimal degrees)						
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 1											
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)						
NW NE	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map					o)		
	Pump test data: Well water was ft.											
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:						
SW SE	after hours pumping g											
<u> </u>	Estimated Yield:					6 Elevation :ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in.			n. to ft. and			Source: Land Survey GPS Topographic Map					
mile	mile in. to ft.						☐ Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:		ter Supply: well					Field Water Sup					
Household	6. Dewatering: how many wells?											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID											
2. Irrigation	8. Monitoring: well ID											
3. ☐ Feedlot	9. Environmental Remediation: well ID Air Sparge Soil Vapor Ext				••••	b) Open Loop Surface Discharge Inj. of Water						
4. ☐ Industrial	☐ Recovery		-				er (specify):					
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												
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)												
								rom	ft to	ft		
SCREEN-PERFORATED INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		10., 1 10111				10., 1 10111 .			16.			
☐ Septic Tank	□ Lateral Line	es 🔲 Pit P	rivy		☐ Li	ivestock Pen	s \square	Insectic	ide Storage			
☐ Sewer Lines	☐ Cess Pool	☐ Sewa				uel Storage			ned Water V	Well		
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age \square	Oil Wel	l/Gas Well			
☐ Other (Specify)												
10 FROM TO	LITHOLOG		rom we	FROM					DI LICCINO	G INTERVALS		
10 FROM 10	LITHOLOG	JIC LUG		FRON	1	10 1	LITHO. LOG (C	ont.) or	PLUGGIN	JINTERVALS		
				Notes:	I							
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	nis Wat	ter Well	Recor	rd was com	pleted on (mo-	-day-ye	ar)			
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.											