

WATER WELL RI ☐ Original Record ☐		W W C-5		0201		sion of Water			Wall ID		
1 LOCATION OF WA		e in Well U				irces App. N		Township Numb	Well ID	naa Numban	
	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W		
County:		/4 ,		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:									
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	Donth(s) Croundwater Engagetered: 1)					8,					
SECTION BOX:	2) ft. 3) ft., or 4) \square I				Ory Well Datum: □ WGS 84 □ NAD 83 □ NAD 27						
	WELL'S STATIC WATER LEVEL:				t. Source for Latitude/Longitude:						
	□ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr)					□GI	PS (u	ınit make/model:	·)	
NW NE					• • • • • • •			VAAS enabled? □		No)	
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map						
W E	afterhours pumpinggpi Well water wasft.					☐ Online Mapper:					
SW SE	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 Wa							d Water Supply: 16			
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 Extra					b) Open Loop Surface Discharge Inj. of Water					
4. ☐ Industrial	☐ Recovery		Injection		-			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											
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											
Nearest source of possible		. 10., 1 10111	••••••	11. 10		1, 1 10111 .					
☐ Septic Tank	☐ Lateral Line	s [l Pit Privy		\Box L	ivestock Per	ns	☐ Insection	cide Storage	3	
☐ Sewer Lines	☐ Cess Pool] Sewage L			Guel Storage			oned Water	Well	
☐ Watertight Sewer Line			☐ Feedyard		☐ F	Fertilizer Stor	rage	☐ Oil We	ell/Gas Well	Į	
☐ Other (Specify)											
										IC INTERNAL C	
10 FROM TO	LITHOLOG	JIC LUG		FRO	M	TO	LIII	HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
				Notes	S:						
11 CONTRACTOR'S	OR LANDOWNER'S	CERTI	FICATIO	N: This	water	well was	coı	nstructed, \square reco	onstructed	or plugged	
under my jurisdiction and	d was completed on (m	no-day-ye	ar)		and th	his record is	s tru	e to the best of m	y knowled	lge and belief.	
Kansas Water Well Cont											
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.											

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