

WATER WELL RI		W W C-5		1110		ion of Water			W-11 ID				
Original Record 1 LOCATION OF WA		e in Well U Fraction	se	1		rces App. N		Township Numb	Well ID	naa Numban			
	1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W				
County:		/4 /		r Duro	1 Addragg 1	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:				T							
3 LOCATE WELL		ft	5 Latitu	de.			(decimal degrees)						
WITH "X" IN	Donth(s) Groundwater Engagetared: 1)						8,						
SECTION BOX:	2) ft. 3) ft., or 4)					Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27							
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:								
	below land surface,			□GI	PS (u	nit make/model:)					
NW NE	above land surface, measured on (mo-day-yr)				•••••			VAAS enabled?		No)			
	Pump test data: Well water was ft. after hours pumping gpr				☐ Land Survey ☐ Topographic Map								
E E	Well water was ft.					☐ Online Mapper:							
SW SE	afterhours pumping				n								
	Estimated Yield:							n:ft. Ground Level TOC					
S	Bore Hole Diameter:	ft. and	nd Source: Land Survey GPS Topographic Map										
mile	in. to ft.												
7 WELL WATER TO BE USED AS:													
1. Domestic:	5. Public Water Supply: well ID												
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: wen ib 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? Yes 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		16., 1 10111 .	••••••	. 11. 10		10., 1 10111 .							
☐ Septic Tank	Lateral Line	s 🗆	Pit Privy		□L	ivestock Per	ıs	☐ Insection	cide Storag	e			
☐ Sewer Lines	☐ Cess Pool		Sewage L		□F	uel Storage			oned Water				
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Stor	rage	☐ Oil We	ell/Gas Wel	Į			
☐ Other (Specify)													
			nce from v							IC INTERNAL C			
10 FROM TO	LITHOLOG	JIC LOG		FRO	NI .	TO	LHI	HO. LOG (cont.) or	PLUGGI	GINTERVALS			
				Notes	:								
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	ICATIO	N: This v	vater	well was	coı	nstructed, \square reco	onstructed	or plugged			
under my jurisdiction an	d was completed on (m	no-day-yea	r)		and th	nis 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