

| Original Record | | W W C-5 | | 0000 | | sion of Wate | | | Wall II | | |
|--|--|---|--|----------------------------|------------------|---|-------------------|--------------------------|-------------------------|-------------------|--|
| 1 LOCATION OF WA | | e in Well I | | | | irces App. N | | Township Numb | Well II | | |
| | Fraction 1/4 1/4 1/4 1/4 | | | Section Number | | Г | Township Numb | er R | ange Number ☐ E ☐ W | | |
| County: | | 74 | Street or Rural Address where well is located (if unkn | | | | | | | | |
| 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 | L Donth(c) (Proundwater Engountered: 1) | | | | | | | | | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) | | | | | | | | | | |
| N | WELL'S STATIC WA | ft. | ft. Source for Latitude/Longitude: | | | | | | | | |
| | below land surface, measured on (mo-day-y | | | | | G | PS (ı | PS (unit make/model:) | | | |
| X - NW NE | above land surface, | | • • • • • • • | (WAAS enabled? ☐ Yes ☐ No) | | | | | | | |
| | Pump test data: Well w | | | | | Survey | | | | | |
| W E | after hours | | | ☐ Oı | ☐ Online Mapper: | | | | | | |
| SW SE | after hours | • | | | | | | | | | |
| | Estimated Yield: | | | | | | | :ft | . 🔲 Grou | nd Level 🔲 TOC | |
| S | Bore Hole Diameter: in. to ft. | | | | | nd Source: Land Survey GPS Topographic Map | | | | | |
| mile | in. to ft. | | | | | | | Other | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | |
| 1. Domestic: | Public Wa | | | | | | | ld Water Supply: 10 | | | |
| Household | 6. Dewatering: how many wells? | | | | | | | | | | |
| Lawn & Garden | 7. Aquifer Recharge: well ID | | | | | | | | | | |
| Livestock | 8. Monitoring: well ID | | | | | | | | | | |
| 2. ☐ Irrigation 3. ☐ Feedlot | 9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extra | | | | | a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water | | | | | |
| 4. ☐ Industrial | ☐ Recovery | | Injection | LAHACHOI | 1 | | | | | | |
| 4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify): | | | | | | | | | | | |
| Water well disinfected? \square Yes \square No | | | | | | | | | | | |
| Water Well disinfected? ☐ Yes ☐ NO 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other | | | | | | | | | | | |
| Casing diameter | | | | | | | | | | | |
| 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 ☐ 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 | | . It., From | | It. to | | It., From . | | It. to | It. | | |
| Septic Tank | Lateral Line | е Г | ☐ Pit Privy | | Пι | ivestock Per | ne | ☐ Insection | cide Stora | Ge. | |
| Sewer Lines | ☐ Cess Pool | | Sewage L | agoon | | Fuel Storage | | ☐ Aband | | | |
| ☐ Watertight Sewer Line | | | | | | ertilizer Sto | | | | | |
| Other (Specify) | | | | | | | | | | | |
| Direction from well? | | | | | | | | | | | |
| 10 FROM TO | LITHOLOG | GIC LOG | | FRO | M | TO | LIT | HO. LOG (cont.) or | PLUGG | NG INTERVALS | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | NI-4- | | | | | | | |
| Notes: | | | | | | | | | | | |
| | | | | | | | | | | | |
| 11 CONTRACTOR'S | OR LANDOWNED'S | CERTI | FICATIO | N. This | water | well was F | 7 00 | nstructed \square reco | nstructe | d or nlugged | |
| under my jurisdiction an | d was completed on (m | no-dav-ve | ar) | 11119 | and th | nis record i | s tru | ie to the best of m | y knowle | edge and belief. | |
| Kansas Water Well Cont | ractor's License No | | This W | ater Wel | Reco | ord was con | nple | ted on (mo-day-y | 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. | | | | | | | | | | |
| Les Department of Frealth at | a Lavironnicii, Burcau Ol V | , aici, Ocoli | es section, | LOUG D W Jac | C HOGA | , Duite 420, | Tobe | na, mansas 00012-130 | ,,, rerebii | nic 105-270-3303. | |

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