

WATER WELL		WWC-5		0201		ion of Wate			****			
<u> </u>		e in Well Us	se			rces App. N		T 1: N 1	Well ID	NY 1		
1 LOCATION OF V	VATER WELL:	Fraction	1/ 1	, 1/	Secti	ion Numbe	r	Township Numb		nge Number		
County:		1/ ₄ First:	1/4 1/		. D	1 4 11	1	T S	R	□E □W		
2 WELL OWNER: Business:	Last Name:		t or Rural Address where well is located (if unknown, distance and									
Address:	direction from nearest town or intersection): If at owner's address, check here:											
Address:												
City:	State:	ZIP:										
3 LOCATE WELL	4 DEPTH OF COM	IDI ETEN	WEII.		ft	5 Totitu	. .			(1 ' 11)		
WITH "X" IN			,									
SECTION BOX:	Depth(s) Groundwater Encountered: 1)											
N	WELL'S STATIC WATER LEVEL:											
	□ below land surface, measured on (mo-day-yr							unit make/model:)		
NW NE	above land surface, measured on (mo-day-yr)							WAAS enabled? □				
	Pump test data: Well water was ft.					☐ Land Survey ☐ Topographic Map						
W E	E after hours pumping					Online Mapper:						
SW SE	Well water was					6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to											
mile							Other					
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
☐ Household	nold 6. ☐ Dewatering: how many wells?					11. Test Hole: well ID						
Lawn & Garden	_											
Livestock	8. Monitoring: well ID											
2. Irrigation												
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge☐ Recovery		Soil Vapor	Extraction	1							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected?												
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 ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.												
	AL: Neat cement									•••••		
Grout Intervals: From												
Septic Tank	Die contamination: Lateral Line	е П	Pit Privy		Пт	ivestock Per	ne	□ Insecti	cide Storage			
Sewer Lines	☐ Cess Pool		Sewage La	agoon		uel Storage			oned Water			
☐ Watertight Sewer L			Feedyard			ertilizer Sto			ll/Gas Well			
☐ Other (Specify)												
		Dista	nce from v	vell?								
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
				% T.= 4 ·								
	Notes:											
11 CONTDACTODS	 S OR LANDOWNER'S	СЕРТІБ	ICATIO	N. Thio-	vator :	wall was F	7.00	netructed Dress	netruoted	or nlugged		
under my jurisdiction	and was completed on (n	O-day-veat	10A110. r)	14. IIIIS /	water ' and th	wen was L	_ co s tru	e to the best of m	v knowled	or □ prugged ge and belief		
Kansas Water Well Co	and was completed on (montractor's License No	year	. This W	ater Well	Reco	rd was con	nple	ted on (mo-day-v	ear)	5- 4114 001101.		
under the business nar	ne 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.												
Lepartment of Health	and Environment, Bureau of V	vater, Geolog	y section, I	ooo sw jac	KSOH SI	ı., suite 420,	rope.	ka, Kansas 00012-130	77. reiepnone	; 100-440-3303.		