

WATER WELL R ☐ Original Record ☐		W W C-5		1101		ion of Water			W-11 ID			
1 LOCATION OF WA		e in Well U	se			rces App. N		Torringhin Mumb	Well ID	a a a Mumban		
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		[Township Numb T S	er Rai	nge Number □ E □ W			
		/4 /-		r Direc	1 Addross r	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) (Proundwater Engountaries 1)					8						
SECTION BOX:	SECTION BOX: ft 3) ft or 4)					Dongread:						
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr)					□GF	PS (u	nit make/model:)		
- XNW NE							(W	VAAS enabled?	Yes 🗆 l	√o)		
								l Survey				
W E	after hours pumping g Well water was ft.				Online Mapper:							
SW SE	after hours pumping											
	Estimated Yield:						6 Elevation :ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to									opographic Map		
mile		ft.	Other									
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
☐ Household	6. Dewatering: how many wells?											
☐ Lawn & Garden	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID											
☐ Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?						
2. Irrigation	9. Environmental Remediation: well ID											
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext					1	b) Open Loop						
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify):												
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												
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)												
								other (specify)		•••••		
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible		,				,						
☐ Septic Tank	☐ Lateral Line		Pit Privy			ivestock Per	ıs		cide Storage			
☐ Sewer Lines	Cess Pool		Sewage La			uel Storage			oned Water			
☐ Watertight Sewer Lin			Feedyard		\Box F	ertilizer Stor	age	☐ Oil We	ll/Gas Well			
☐ Other (Specify)												
			nce from w							IC DITEDMALC		
10 FROM TO	LITHOLOG	JIC LUG		FRO	IVI	TO	LIII	HO. LOG (cont.) or	PLUGGIN	GINTERVALS		
				Notes								
110105.												
				-								
11 CONTRACTOR'S	OR LANDOWNER'S	CERTIE	TCATIO	N: This v	vater v	well was	Cor	structed \Box reco	nstructed	or nlugged		
under my jurisdiction an	d was completed on (m	no-dav-vea	r)		and th	is record is	, 501 5 (1116	e to the best of m	v knowled	ge and belief.		
Kansas Water Well Con	tractor's License No		. This W	ater Well	Reco	rd was com	plet	ed 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.												
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KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html