

Original Record		W W C-5		2000		sion of Water			Wall ID		
		e in Well U				irces App. N		Township Numb	Well ID	n an Numban	
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4		1/4 1/4	Section Number		r	Township Numb		Range Number R □ E □ W	
2 WELL OWNER: La		/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						8					
	SECTION BOX: ft 3) ft or 4)					Dongreade					
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
							PS (u	nit make/model:	e)	
NW NE							(WAAS enabled? ☐ Yes ☐ No)				
	Pump test data: Well water was ft.							l Survey			
WE	after hours			☐ Online Mapper:							
swse	Well w										
		pumping gpm			6 Elevat	tion:	ft	ft. 🔲 Ground Level 🔲 TOC			
S	Estimated Yield:gpm Bore Hole Diameter:ii					Source: Land Survey GPS Topographic Map					
1 mile											
1 mile in. to ft. Uniter											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. Dewatering: how many wells?										
Lawn & Garden											
☐ Livestock	8. Monitoring: well ID										
2. Irrigation	9. Environmental Remediation: well ID										
3. Feedlot						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):					
4. Industrial	Recovery		Injection			13. ∐ Otl	her (s	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 ft., Diameter ft., Diameter ft.											
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											
Grout Intervals: From											
Nearest source of possible		. 10., 1 10111		10. 10		10., 1 10111 .					
Septic Tank	Lateral Line	s \square	Pit Privy			ivestock Per	ns	☐ Insection	cide Storage	2	
Sewer Lines	Cess Pool		Sewage L	agoon		uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		□ F	ertilizer Sto	rage	☐ Oil We	ell/Gas Well		
☐ Other (Specify)											
			ance from v								
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LITE	HO. LOG (cont.) or	: PLUGGIN	GINTERVALS	
				NT 4							
Notes:											
11 CONTRACTOR'S	OD I ANDOWNED!	CFDTI	FIC A TIO	N. This	weter.	woll was F	7	netruoted Descri	onetmicts.1	or Daluesed	
under my jurisdiction an	d was completed on (n	o-day-ve	rICATIO ar)	TA: THIS	water and th	wen was L	_ CO1 s_tr114	usuucieu, 🔲 Tec(e to the best of m	nistructed, v knowled	or □ prugged oe and helief	
Kansas Water Well Cont	ractor's License No		This W	/ater Wel	Reco	ord was con	າກlet	ed on (mo-day-v	ear)	ge and belief.	
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 ar	d Environment, Bureau of V	Vater, Geolo	gy Section, 1	1000 SW Ja	ekson S	t., Suite 420,	Topek	ka, Kansas 66612-136	7. Telephon	e 785-296-3565.	

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