

WATER WELL R		WWC-5	DIV	rision of Water		W II ID		
Original Record 1 LOCATION OF W.		ge in Well Use Fraction		ources App. No. etion Number		Well ID Range Number		
County:	Fraction		ction Number $egin{array}{ c c c c c c c c c c c c c c c c c c c$					
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: Street of Rufal Address where well is focated (if disknown, distance and direction from nearest town or intersection): If at owner's address, check here:								
Address:								
Address:	~							
City:	State:	ZIP:						
3 LOCATE WELL WITH "X" IN	4 DEPTH OF COM	APLETED WELL: .	ft	5 Latitude:(decimal degrees)				
	SECTION BOX: Depth(s) Groundwater Encountered: 1)				Longitude:(decimal degrees)			
N N		2) ft. 3) ft., or 4) \(\subseteq \text{Dry W} \)			□ WGS 84 □ NAI			
	WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day-yr)				Source for Latitude/Longitude: GPS (unit make/model:)			
NW NE		, measured on (mo-day-			(WAAS enabled? Yes No)			
NW NE		ater was ft.			☐ Land Survey ☐ Topographic Map			
W E		pumpinggpm			Online Mapper:			
SW SE	Well water was ft. after hours pumping gpm							
	Estimated Yield:	gpm	6 Elevation :ft. ☐ Ground Level ☐ TOC					
S		gpm				GPS Topographic Map		
mile	in. to ft.			Other				
7 WELL WATER TO BE USED AS:								
1. Domestic: 5. Public Water Supply: well ID								
Household	ng: how many wells?			11. Test Hole: well ID				
☐ Lawn & Garden ☐ Livestock	en 7. ☐ Aquifer Recharge: well ID 8. ☐ Monitoring: well ID			☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?				
2. Irrigation	9. Environment		a) Closed Loop Horizontal Vertical					
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Extr			b) Open Loop Surface Discharge Inj. of Water				
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? ☐ Yes ☐ No								
8 TYPE OF CASING USED: Steel PVC Other								
Casing diameter								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Stainless Steel □ 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 contamination:								
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage								
☐ Sewer Lines	☐ Cess Pool			Fuel Storage		oned Water Well		
☐ Watertight Sewer Lin	☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)							
Direction from well?					f.			
10 FROM TO	LITHOLO		FROM			· · PLUGGING INTERVALS		
TO TROM TO	LITHOLO	SIC LOG	TROW	TO E	TITIO. EOG (cont.) of	TEOGORIO IIVIERVAES		
Notes:								
11 CONTRACTORS OR LANDOWNERS CERTIFICATION. This makes will be a second of the second								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)								
Kansas Water Well Con	tractor's License No	This Wa	iter Well Red	ord was comn	leted on (mo-day-ve	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.								