

W	_		RECORD		WWC-5 1093	L		on of Wate					
1							11			Well ID	ge Number		
1	1 LOCATION OF WATER WELL: County:				$\begin{array}{c c} 1 & 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\$			$\begin{array}{c c} T & S \\ T & S$					
2	WELL	OWNER: I	Last Name:		First: Street or Rur			I Address where well is located (if unknown, distance and					
	Business: Address:					direction from nearest town or intersection): If at owner's address, check here:							
	Address: City:			ZIP:									
3	LOCAT	E WELL		State:									
	WITH "				PLETED WELL: ft. Encountered: 1) ft.			5 Latitude:(decimal degrees) Longitude:(decimal degrees)					
	SECTIO N			3) ft., or 4)		l	Datum: WGS 84 NAD 83 NAD 27						
1				TER LEVEL:			Source for Latitude/Longitude:						
	1	X	<ul> <li>below land surface, measured on (mo-day-yr)</li> <li>above land surface, measured on (mo-day-yr)</li> </ul>					□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No) □ Land Survey □ Topographic Map					
	NW	NE	Pump test data: Well water was ft.										
W		E	-	after hours pumping gpm					□ Online Mapper:				
	SW	SE	Well water was ft.										
				after hours pumping gpm Estimated Yield:gpm					6 Elevation:ft.  Ground Level  TOC				
		5			gr in. to	ft. and		Source:  Land Survey  GPS  Topographic M					
	1 n				in. to ft.			Other					
	7 WELL WATER TO BE USED AS:         1. Domestic:       5. □ Public Water Supply: well ID         10. □ Oil Field Water Supply: lease												
	☐ Housel			6. Dewatering: how many wells?						le: well ID			
	□ Lawn &				echarge: well ID			🗌 Ca	ased	Uncased C	Geotechnica	1	
	Livesto			g: well ID			12. Geothermal: how many bores?						
	☐ Irrigati ☐ Feedlor			Air Sparge	al Remediation: well ID			a) Closed Loop  Horizontal  Vertical b) Open Loop  Surface Discharge  Inj. of Water					
	Industr			Recovery		13. Other (specify):							
W	Was a chemical/bacteriological sample submitted to KDHE?       Yes       No       If yes, date sample was submitted:												
			? 🗌 Yes 🔲 ]							-			
	8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
	Casing diameter in. to ft., Diameter in. to ft., Diameter ft.												
	Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
	□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)												
	Brass Galvanized Steel Concrete tile None used (open hole)												
SC	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)												
SC	CREEN-P	PERFORAT	ED INTERVA	ALS: From	n ft. to	ft., From	m	ft. to	o	ft., From			
					n ft. to								
					Cement grout Be ft., From								
			le contaminatio			11. 10	•••••	, 1 10111					
	Septic '			ateral Line				vestock Pe		Insection	0		
	Sewer I	Lines ght Sewer Li		Cess Pool leepage Pit				el Storage		☐ Abando □ Oil Wel		Well	
	Other (	Specify)						stunzer Su	Jage		i/Gas weii		
Di	rection fro				Distance from we	ell?							
10	FROM	TO	L	ITHOLOG	GIC LOG	FROM	[	ТО	LITI	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
							_						
						_							
						Notes:							
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)													
un K	der my ju	irisdiction a	nd was comple	eted on (n	10-day-year) This Wa	a ater Well I	nd thi	is record i	15 tru mnlet	e to the best of my	y knowled	ge and belief.	
Kansas Water Well Contractor's License No													
	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.												
	-		eks.gov/waterwell		rater, Geology Section, 10	NO 5 W Jack	5011 <b>S</b> L	., Suite 420,	торен	xa, ixanisas 00012-130.		SA 82a-1212	