

WATER WELL RI		W W C-5		0410		sion of Wate			W-11 ID		
		e in Well U				irces App. N		Torreshin Numb	Well ID	ana Numban	
1 LOCATION OF WATER WELL: County:		Fraction			Section Number		Г	Township Numb	er Rai	Range Number R □ E □ W	
2 WELL OWNER: La		74 7		r Direc	1 Addraga	who	- ~				
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:										check here.	
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN Depth(s) Groundwater Encountered: 1)											
SECTION BOX: (2) ft (3) ft or (4)											
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
X	below land surface, measured on (mo-day-yr)						PS (ı	ınit make/model:)	
NW NE	above land surface, measured on (mo-day-yr)							(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
WE	after hours pumping gp Well water was ft.					Online Mapper:					
SW SE				nm							
		pumping gpm gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Estimated Yield:gpm S Bore Hole Diameter:in. to					Source: Land Survey GPS Topographic Map					
1 mile			Other								
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 (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 in. to 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 ft. to ft., From ft., From ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From										,	
Nearest source of possible		. 10., 1 10111		. 11. 10		, 110111					
☐ Septic Tank	Lateral Line	s [Pit Privy			ivestock Per	ns	☐ Insection	cide Storage	è	
Sewer Lines	Cess Pool		Sewage L	agoon		uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Sto	rage	☐ Oil We	ll/Gas Well		
☐ Other (Specify)											
			ance from v								
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LITI	HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
				NT 4							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction an	OK LANDOWNER'S	OLEKTI.	rICATIO ar)	in: Inis	water	well was L	_ CO	iistructed, \coprod rect	onstructed,	or plugged	
Kansas Water Well Cont	a was completed on (II. tractor's License No	ю-чау-уе	ar) Thic W	ater Well	anu ti Reco	nd was con	งนน กกไค	ted on (mo-day-v	.y kiiowieu ear)	ge and belief.	
under the business name											
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	000 SW Jac	ekson S	t., Suite 420,	Topel	ka, Kansas 66612-136	7. Telephon	e 785-296-3565.	

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