

Original Record		W W C-5	_	1000		ion of Water			Wall ID		
		e in Well U	se			rces App. N		Township Numb	Well ID	nga Numban	
1 LOCATION OF WATER WELL: County:		Fraction		/ ₄ 1/ ₄	Section Number		r	Township Numb		Range Number R □ E □ W	
- v		74 7		r Direc	1 Addragg	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:										check here.	
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL		ft	5 Latitu	de.			(decimal degrees)				
WITH "X" IN	Donth(c) (Proundwater Engountered: 1)										
	SECTION BOX: ft or 4)										
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	below land surface.	y-yr)			PS (u	nit make/model:)			
NW NE	above land surface,		· · · · · · · · · · · · · · · · · · ·			(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											
	Estimated Yield:			pumpinggpm			tion:	n:ft. ☐ Ground Level ☐ TOC			
S	Bore Hole Diameter: in. to										
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					12. Geothermal: how many bores?					
2. Irrigation	9. Environmental Remediation: well ID										
3. Feedlot Air Sparge Soil Vapor Ext					1	b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):					
4. Industrial	Recovery		Injection			13. ∐ Otl	ner (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 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)											
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		10., 1 10111 .		. 11. 10		10, 110111 .					
☐ Septic Tank	☐ Lateral Line	s 🗆	Pit Privy			ivestock Per	ıs	☐ Insection	cide Storage	e	
Sewer Lines	Cess Pool		Sewage L	agoon		uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Stor	rage	☐ Oil We	ell/Gas Wel	l	
Other (Specify)											
Direction from well?			ince from v								
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LITE	HO. LOG (cont.) or	PLUGGIN	IG INTERVALS	
				NT 4							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction an	d was completed on (n	o-day, yee	1CA 110 r)	14: 1 mis 7	water '	wen was L] COI	ustructed, $\ \ \ \ \ $ reco	v knowled	or <u></u> prugged loe and belief	
Kansas Water Well Cont	ractor's License No		This W	ater Well	Reco	rd was con	າກlet	ed on (mo-day-v	ear)	ige and belief.	
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) 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, Geolog	y Section, 1	000 SW Jac	ekson S	t., Suite 420,	Topek	ka, Kansas 66612-136	Telephor	ie 785-296-3565.	

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