

WATER WELL R		W W C-5				ion of Water			W-11 ID			
Original Record 1 LOCATION OF WA		e in Well U	se			rces App. N		Torreshin Numb	Well ID			
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		[Township Numb	er Ra	nge Number □ E □ W			
· ·		74 74		r Diiro	1 Addross r	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:				T						
3 LOCATE WELL	ft	5 Latitu	de.			(decimal degrees)						
WITH "X" IN	Donth(c) (Froundwater Encountered:					8,						
SECTION BOX:	2) ft. 3) ft., or 4) \square I				Well Datum: TWGS 84 TNAD 83 TNAD 27							
1	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface,			□GF	PS (u	nit make/model:)				
NW NE	above land surface, measured on (mo-day-yr) Pump test data: Well water was				• • • • • • • • • • • • • • • • • • • •			VAAS enabled?				
								urvey 🔲 Topogr				
W A E	after hours pumping gpi Well water was ft.					☐ Online Mapper:						
SW SE	after hours pumping g											
	Estimated Yield:					6 Elevation :ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter:	ft. and	d Source: Land Survey GPS Topographic Map									
mile	in. to ft.											
7 WELL WATER TO BE USED AS:												
1. Domestic:	5. Public Water Supply: well ID											
Household	6. Dewatering: how many wells?											
☐ Lawn & Garden☐ Livestock	7. Aquifer Recharge: well ID											
2. Irrigation	8. Monitoring: well ID											
3. ☐ Feedlot	Air Sparge ☐ Soil Vapor Extr					b) Open Loop Surface Discharge Inj. of Water						
4. ☐ Industrial	☐ Recovery		njection		-			specify):				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected? \square Yes \square No												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter in. to												
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												
Grout Intervals: From												
Nearest source of possible						,						
☐ Septic Tank	□ Lateral Line	s \square	Pit Privy		\Box L	ivestock Per	ıs	☐ Insection	cide Storag	ge .		
☐ Sewer Lines	☐ Cess Pool		Sewage La			uel Storage		☐ Abando				
☐ Watertight Sewer Lin			Feedyard		\Box F	ertilizer Stor	age	☐ Oil We	ll/Gas We	11		
								C.				
Direction from well? 10 FROM TO	LITHOLOG		nce from w	FRO				1t. HO. LOG (cont.) 01		NC INTEDVALE		
10 FROM 10	LITHOLOG	JIC LUG		FRO	IVI	10	LIII	10. LOG (cont.) of	PLUGGI	NUTIVIERVALS		
				Notes	<u> </u>	ı						
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	ICATIO	N: This v	water v	well was	coı	nstructed, 🔲 reco	onstructed	, or plugged		
under my jurisdiction an	d was completed on (m	no-day-yea	r)		and th	is record is	s true	e to the best of m	y knowle	dge and belief.		
Kansas Water Well Cont												
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.												

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