

WATER WELL RI		W W C-5		07 10		sion of Water			W-11 ID			
<u> </u>		e in Well U				rces App. No		T 1. ' . N 1.	Well ID	NT1		
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number		
County:	1/4	1/4 1		- D	1 4 1 1		T S	R	□ E □ W			
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distant												
Business: direction from nearest town or intersection): If at owner's address, check here:												
Address:												
City:	State:	ZIP:										
3 LOCATE WELL	4 DEPTH OF COL	IDI EWEI	D WELL.		Cı	···						
WITH "X" IN	WITH "X" IN  SECTION POY.  Depth(s) Groundwater Encountered: 1)						8,					
SECTION BOX:	SECTION BOX: ft 3) ft or 4)					Editate:						
N	WELL'S STATIC WATER LEVEL:				211				_	NAD 27		
	below land surface, measured on (mo-day-yr)							<u>Latitude/Longitude</u> nit make/model:		`		
NW NE										· ·		
W	Pump test data: Well water was ft.				(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					10)		
W E	after hours pumping gpi											
SW X SE	Well water was ft.											
SW   A- SE	arter nours pumping					m ft Ground Level G TOC				11 1 TTOC		
	Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC						
S	Bore Hole Diameter: in. to f					and Source: Land Survey GPS Topographic Map						
1 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	_ 1 &											
2. Irrigation	8. Monitoring: well ID											
3. ☐ Feedlot	9. Environmental Remediation: well ID  ☐ Air Sparge ☐ Soil Vapor Extr					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial	☐ Recovery		Injection	Latituetion	•							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
8 TYPE OF CASING USED:  Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in to ft. Diameter in to ft. Diameter in to ft.												
Casing diameter												
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 ft. to ft., From ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible		_	<b>-</b>									
Septic Tank	Lateral Line		Pit Privy			ivestock Pen	ıs		cide Storage			
Sewer Lines	Cess Pool		Sewage L			uel Storage			oned Water			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
10 FROM TO	LITHOLOG		ance from v	FRO				HO. LOG (cont.) or		IG INTERVALS		
10 11(0)(1	EIIIOEO	JIC LOG		TRO	.,,	10		10. 200 (cont.) of	T EC COII	GHTERTIES		
				Notes	s:	<u> </u>						
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTI	FICATIO	N: This	water	well was	cor	nstructed, 🔲 reco	onstructed,	or plugged		
under my jurisdiction and	d was completed on (m	no-day-ye	ar)		and th	nis record is	s true	e to the best of m	y knowled	ge and belief.		
Kansas Water Well Cont	tractor's License No		This W	ater Well	Reco	ord was com	iplet	ed on (mo-day-y	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.												

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