

| WATER WELL R ☐ Original Record ☐ | | WWC-5 | 1000. | | | ion of Water | | | Well ID | | | |
|---|---|--|----------|----------|------------------------------------|---|-----------------|----------------------|--------------|-------------------|--|--|
| | <u> </u> | e in Well Use Fraction | | | | rces App. No | | Courselin Numb | | aga Numbar | | |
| 1 LOCATION OF WATER WELL: County: | | 1/4 1/4 1/4 | | 1/4 | Section Number | | | Γownship Numb T S | | Range Number R | | |
| 2 WELL OWNER: La | First: | | - | Duro | 1 Addross v | vhoro | well is located | | | | | |
| Business: | | | | | | | | | | | | |
| Business: direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | | | | | |
| Address: | | | | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | | | | |
| 3 LOCATE WELL | 4 DEPTH OF COM | IPLETED WI | ELL: | | ft | 5 Latitu | de. | | | (decimal degrees) | | |
| WITH "X" IN | Depth(s) Groundwater Encountered: 1) | | | | | . ft. 5 Latitude: | | | | | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) 🗆 I | | | | | | | | | | | |
| 11 | WELL'S STATIC WATER LEVEL: | | | | ft. Source for Latitude/Longitude: | | | | | | | |
| | below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr | | | | | ☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No) | | | | | | |
| NW NE | | | | | ••••• | | | | | | | |
| | Pump test data: Well water was ft. | | | | ☐ Land Survey ☐ Topographic Map | | | | | | | |
| W E | after hours pumping gp Well water was ft. | | | | | ☐ Online Mapper: | | | | | | |
| SW SE | after hours pumping g | | | | | | | | | | | |
| | Estimated Yield: | | | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | | | |
| S | Bore Hole Diameter: in. to | | | | | Source: Land Survey GPS Topographic Map | | | | | | |
| mile | in. to ft. | | | | | | | ☐ Other | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | |
| 1. Domestic: | 5. Public Wa | | | | | | | Water Supply: 16 | | | | |
| Household | 6. Dewatering: how many wells? | | | | | | | | | | | |
| ☐ Lawn & Garden ☐ Livestock | 7. Aquifer Recharge: well ID | | | | | | | | | | | |
| 2. Irrigation | 8. Monitoring: well ID | | | | | 12. Geothermal: how many bores? | | | | | | |
| 3. ☐ Feedlot | 9. Environmental Remediation: well ID Air Sparge Soil Vapor Ext | | | | | b) Open Loop Surface Discharge Inj. of Water | | | | | | |
| 4. ☐ Industrial | ☐ Recovery | | _ | | | | | ecify): | | | | |
| 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 | | | | | | | | | | | | |
| 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) | | | | | | | | | | | | |
| | | | | | | | | ft From | ft to | ft | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | | | | |
| Nearest source of possible | | , | | | | , | | | | | | |
| ☐ Septic Tank | □ Lateral Line | | | | ☐ Li | ivestock Per | ıs | | cide Storage | | | |
| ☐ Sewer Lines | Cess Pool | ☐ Sew | | oon | | uel Storage | | | oned Water | | | |
| ☐ Watertight Sewer Lin | | | | | ☐ Fe | ertilizer Stor | age | ☐ Oil We | ll/Gas Well | | | |
| ☐ Other (Specify) | | | | | | | | | | | | |
| 10 FROM TO | LITHOLOG | | Iroin we | FRON | | | | O. LOG (cont.) 01 | | GINTERVALS | | |
| TO TROM TO | LITHOLOG | one roo | | TRON | /1 | 10 | LIIII | O. LOG (cont.) of | LUGGIN | UINTERVALS | | |
| | | | | | | | | | | | | |
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| | | | | Notes: | | | | | | | | |
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| | | | | | | | | | | | | |
| 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) | | | | | | | | | | | | |
| Kansas Water Well Con | tractor's License No | T | his Wa | ter Well | Reco | rd was com | iplete | d 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. | | | | | | | | | | | | |
| | | 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. | | | | | | | | | | |