

WATER WELL R		WWC-5 1071	DIV	ision of Water			
Original Record		ge in Well Use		ources App. No.		Well ID	
1 LOCATION OF WATER WELL:				tion Number	ion Number Township Number Range Number		
County:				. 1 A 1 1			
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: Business: Address: Address: ZIP:							
3 LOCATE WELL							
WITH "X" IN	TTH "X" IN 4 DEPTH OF COMPLETED WELL:				5 Latitude:(decimal degrees)		
SECTION BOX:		Depth(s) Groundwater Encountered: 1) 1)			Longitude:(decimal degrees)		
Ν	WELL'S STATIC WATER LEVEL: ft.				Datum: 🗌 WGS 84 📋 NAD 83 📄 NAD 27		
	- NW _ I below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr) Pump test data: Well water was				or Latitude/Longitude:)	
					□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)		
					Land Survey Topographic Map		
WE		after hours pumping gpm			Online Mapper:		
SW SE	Well water wasft. after hours pumping						
		gpm	6 Elevati	6 Elevation:ft. Ground Level TOC			
S	Estimated Yield:gpm Bore Hole Diameter:in. to f				Source: Land Survey GPS Topographic Map		
1 mile					□ Other		
7 WELL WATER TO BE USED AS:							
1. Domestic:	5. 🗌 Public W	10. 🗖 Oil I	Field Water Supply: lease				
Household	6. Dewatering: how many wells?				11. Test Hole: well ID		
Lawn & Garden		7. 🔲 Aquifer Recharge: well ID			Cased Uncased Geotechnical		
	8. Monitoring: well ID			12. Geothermal: how many bores?			
 Irrigation Feedlot 	9. Environmental Remediation: well ID			a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water			
4. Industrial	\Box Recovery \Box Injection				13. Other (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 JOINTS: Glued Clamped Welded Threaded							
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.							
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No							
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. to ft.							
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. to ft.							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From							
Nearest source of possible contamination:							
□ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage							
Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well							
□ Watertight Sewer Lin		t 🗌 Feedyard		Fertilizer Stora	ge 🗌 Oil Well/G	ras well	
☐ Other (Specify) Direction from well? ft.							
10 FROM TO	LITHOLO		FROM		ITHO. LOG (cont.) or PL	UGGING INTERVALS	
			Notes:				
			_				
		C CEDTIEICATION	J. This		constructed		
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)							
under the business name	e 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.							
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212							