

WATER WELL RI		W W C-5		7 00 1		sion of Wate			W-11 ID			
Original Record 1 LOCATION OF WA		e in Well U				irces App. N		Township Numb	Well ID	naa Numban		
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb	er Ra	nge Number □ E □ W			
2 WELL OWNER: La		/4 /		r Diiro	1 Addross	who	_ ~					
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:				1						
3 LOCATE WELL	4 DEPTH OF COM	IPLETEI	D WELL:		ft	5 Latitu	ıde.			(decimal degrees)		
WITH "X" IN	WITH "A" IN Donth(s) Groundwater Engountered: 1)					8,						
SECTION BOX:	SECTION BOX: ft or 4)											
14	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:							
	□ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr)					Gl	PS (t	ınit make/model:)		
NW NE								VAAS enabled?		No)		
	Pump test data: Well water was ft. after hours pumping gpi Well water was ft.							Survey Topographic Map				
W E						☐ Oı	☐ Online Mapper:					
SW SE			oumping gpm			6 Elevation:ft. Ground Level TOC						
	Estimated Yield:			5pm								
S	Bore Hole Diameter:	ft. and	nd Source: Land Survey GPS Topographic Map									
mile	in. to ft.						☐ Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:	Public Wa							d Water Supply: 16				
Household	6. Dewatering: how many wells?											
Lawn & Garden	<u> </u>											
Livestock	8. Monitoring: well ID											
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extra					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial	☐ Recovery		Injection	Latraction	ı							
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify):												
Water well disinfected? \square Yes \square No												
8 TYPE OF CASING USED: Steel PVC Other												
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												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		. It., From	•••••	. It. to	• • • • • • • •	It., From .	• • • • •	It. to	It.			
Septic Tank	Lateral Line	. г] Pit Privy		Пτ	ivestock Per	ne	□ Insecti	cide Storag	ρ		
Sewer Lines	☐ Cess Pool		Sewage L	agoon		uel Storage			oned Water			
☐ Watertight Sewer Line						ertilizer Sto			ll/Gas Wel			
☐ Other (Specify)							_					
Direction from well?			ance from v									
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LITI	HO. LOG (cont.) or	PLUGGIN	NG INTERVALS		
				NT 4								
Notes:												
11 CONTRACTOR'S	OD I ANDOWNED!	СЕВТТ	FICATIO	N. Thin	votos.	woll woo F	7	netruoted Drees	motmacta 1	or Dalugged		
under my jurisdiction and	d was completed on (n	o-dav-ve	r ICA HO ar)	14. 11118	water ' and th	wen was L	_ CO	nsuluciou, 🔝 Tecc e to the best of m	v knowlea	, or □ prugged loe and helief		
Kansas Water Well Cont	ractor's License No		This W	ater Well	Reco	ord was con	nple	ted on (mo-day-v	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.												
KS Department of Health an	a Environment, Bureau of V	vater, Geolo	gy Section, 1	1000 SW Jac	ekson S	t., Suite 420, '	ropel	ka, Kansas 66612-136)/. Telephoi	ie /85-296-3565.		

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