

WATER WELL RI		WWC-5	1000			ion of Wate			W 11 ID		
<u> </u>		ge in Well Use				rces App. N		T 1 N 1.	Well ID	NI1	
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4	1/4	Section	on Numbe	er	Township Numb		ige Number		
County: 2 WELL OWNER: Last Name:				-	Dumo	1 A d duaga	rrib o		R	□ E □ W	
Business:	st 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:				unection n	ioiii iiea	arest town of	i iiitei	section). If at Owner	. s audicss,	Theck here.	
Address:											
City:	State:	ZIP:									
3 LOCATE WELL	4 DEPTH OF COM	PLETED W	ELL:		ft. 5 Latitude:(decimal degrees)						
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					Longitude:(decimal degrees)					
SECTION BOX:	2) ft. 3) ft., or 4) \square D				ell Datum: \square WGS 84 \square NAD 83 \square NAD 27						
	WELL'S STATIC WATER LEVEL:							Latitude/Longitude			
	below land surface, measured on (mo-					GPS (unit make/model:)					
NW NE	above land surface, measured on (mo-day				V			WAAS enabled?		(o)	
W	Pump test data: Well water was ft. after hours pumping gpm					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
W X E	Well water was ft.					Опппе маррег.					
SW SE	after hours pumping gpm										
	Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC					
S	Bore Hole Diameter: in. to ft. and					Source: Land Survey GPS Topographic Map					
1 mile in. to ft.											
7 WELL WATER TO BE USED AS:											
1. Domestic: ☐ Household	5. Public Water Supply: well ID					10. Oil Field Water Supply: lease					
☐ Lawn & Garden	6. ☐ Dewatering: how many wells? 7. ☐ Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical					
Livestock						12. Geothermal: how many bores?					
2. ☐ Irrigation	8. Monitoring: well ID					a) Closed Loop					
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction					b) Open Loop Surface Discharge Inj. of Water					
4. ☐ Industrial	☐ Recovery	☐ Inje	ection			13. 🔲 Ot	ther (specify):			
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											
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. to ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Septic Tank	e contamination: Lateral Line	se □ Dit	Privy		Пт	ivestock Pe	ne	□ Insectio	cide Storage		
Sewer Lines	☐ Cess Pool			non		uel Storage					
☐ Watertight Sewer Line											
Other (Specify)											
Direction from well?			from we								
10 FROM TO	LITHOLOG	GIC LOG		FRON	Л	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
				Notes	<u>_</u> ;	I					
				<u></u>							
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFIC	ATION	: This w	vater v	well was] co	nstructed, \square reco	onstructed,	or plugged	
under my jurisdiction an Kansas Water Well Cont	d was completed on (m	no-day-year) .	This W-		and th	ns record i	ıs tru	ted on (me day)	y knowled	ge and belief.	
under the business name	of	· · · · · · · · · · · · · · · · · · ·	ıms wa	ter well	Neco1	iu was coi	пріе	ieu on (mo-day-ye	zai)		
S	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 ar	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.										