

WATER WELL RI		W W C-5		7707		sion of Wate			W-II ID			
		e in Well U				rces App. N		T 1 N 1.	Well ID	N1		
1 LOCATION OF WA	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		nge Number			
County:	1/4 First:	1/4 1/		- D	1 4 11		T S	R	□E□W			
2 WELL OWNER: La		ural Address where well is located (if unknown, distance and										
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	NATE T.		Cı	- T 111	_					
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)											
SECTION BOX:	• • • • • • • • • • • • • • • • • • • •				Bongread:							
N	2) ft. 3) ft., or 4) ☐ ☐ WELL'S STATIC WATER LEVEL:				211			· · · · · · · · · · · · · · · · · · ·		NAD 27		
	below land surface, measured on (mo-day-yr)					Source	oc (<u>Latitude/Longitude</u> ınit make/model:		`		
NW NE								WAAS enabled?		· ·		
NW NE	Pump test data: Well water was ft.							Survey Topogr		.40)		
w	after hours pumping gpn					Online Mapper:						
	Well water was ft.											
SW SE	after hours pumping gp				6 Florestions 6 Florest Front Front							
	Estimated Yield:gpm				~			Elevation:				
S	Bore Hole Diameter:			Source:								
1 mile in. to ft.												
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID												
1. Domestic:												
Household	6. Dewatering: how many wells?											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID											
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:												
Water Well disinfected? ☐ Yes ☐ NO 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other												
Casing diameter												
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		_	.									
☐ Septic Tank	Lateral Line		Pit Privy			ivestock Per			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		
10 110.11	EIIIOEO	JIC LOG		TRO	.,,	10		ito. Eoo (cont.) of	TECCON	IO II (TERCTIES		
Notes:												
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTII	FICATIO	N: This	water	well was	co	nstructed, 🗌 reco	nstructed	or plugged		
under my jurisdiction an	d was completed on (m	no-day-yea	ar)		and th	nis record is	s tru	e to the best of m	y knowled	lge and belief.		
Kansas Water Well Cont												
under the business name of												
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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