

WATER WELL RI		W W C-5		<del>1</del> 001		sion of Water			W-11 ID		
Original Record    1 LOCATION OF WA		e in Well U				irces App. N		Township Numb	Well ID	nga Numbar	
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W		
- v		/4 /		r Duro	1 Addraga	whor	_ ~				
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:									
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	4 DEPTH OF COMPLETED WELL:  Depth(s) Groundwater Encountered: 1)					8					
SECTION BOX:	2) ft. 3) ft., or 4) $\square$ I				Bongroude:(decimal degrees)						
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	<ul> <li>below land surface,</li> </ul>	y-yr)			PS (u	ınit make/model:		)			
NW NE	☐ above land surface,		(			WAAS enabled?  Yes No					
W X F	Pump test data: Well water was ft.							urvey 🔲 Topogr			
W E	after hours pumping gpr					☐ Online Mapper:					
SW   SE	Well water wasft. after hours pumping gp										
	Estimated Yield:gpm					<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter:	ft and									
1 mile				Other							
1 mile  in. to ft. Uniter											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. ☐ Dewaterin										
Lawn & Garden	7. Aquifer Recharge: well ID										
☐ Livestock	8. Monitoring: well ID										
2. Irrigation	9. Environmental Remediation: well ID										
3. ☐ Feedlot						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):					
4. Industrial	Recovery		Injection			13. ∐ Otl	her (s	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 in. to ft., Diameter ft., Diameter ft.											
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)											
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible		. 10., 1 10111				10., 1 10111 .					
☐ Septic Tank	Lateral Line	s 🗆	Pit Privy			ivestock Per	ns	☐ Insection	cide Storag	e	
Sewer Lines	Cess Pool		Sewage L	agoon		uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		□ F	ertilizer Stor	rage	☐ Oil We	ell/Gas Wel	l	
☐ Other (Specify)											
Direction from well?			ance from v								
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LITI	HO. LOG (cont.) or	PLUGGIN	IG INTERVALS	
				<b>3.7</b> /							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed,  reconstructed, or  plugged											
under my jurisdiction an	OK LANDOWNER'S	O-day ya	rICATIO ar)	inis i	water	well was L	COl	iistructed, 🔲 rect	onstructed	or plugged	
Kansas Water Well Cont	a was completed on (II. tractor's License No	io-uay-ye	This W	 /ater Well	anu ti Reco	nd was con	ง แน ากใค่	ed on (mo-day-v	.y Kilowiec ear)	ge and bellet.	
under the business name of											
KS Department of Health ar	d Environment, Bureau of V	Vater, Geolo	gy Section, 1	1000 SW Jac	ekson S	t., Suite 420,	Topel	ka, Kansas 66612-136	7. Telephor	ie 785-296-3565.	

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