

| WATER WELL RI | | WWC-5 | 1103 | | | ion of Water | | W 11 ID | | | |
|---|--|---------------|-----------|--------------|---|--|--|---------------|------------|--|--|
| | | e in Well Use | | | | rces App. No | | Well ID | NY 1 | | |
| 1 LOCATION OF WA | Fraction | 1/ | | Section | on Number | Township Numb | | ige Number | | | |
| County: | 1/4 1/4 | 1/4 | | D1 | 1 4 1 1 | <u>T</u> S | R | □E □W | | | |
| 2 WELL OWNER: Las Business: | | | | | ral Address where well is located (if unknown, distance and | | | | | | |
| Address: | direction from neare | | | | | | rest town or intersection): If at owner's address, check here: | | | | |
| Address: | | | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | | | |
| 3 LOCATE WELL | | ft | 5 Lotitud | lo: | | (daaimal daamaa) | | | | | |
| WITH "X" IN | | | | | | , | | | | | |
| SECTION BOX: ft 2) ft or 4) | | | | | | | | | | | |
| WELL'S STATIC WATER LEVEL: | | | | | | | | | | | |
| below land surface, measured on (mo-day-yr | | | | | GPS (unit make/model:) | | | | | | |
| NW NE | above land surface, measured on (mo-day-yr | | | | |) (WAAS enabled? ☐ Yes ☐ No) | | | | | |
| | Pump test data: Well water was ft. | | | | | ☐ Land Survey ☐ Topographic Map | | | | | |
| W E | after hours pumping gpr | | | | | Online Mapper: | | | | | |
| SW SE | Well water was ft. | | | | | | | | | | |
| after hours pumping gr | | | | gpm | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | | | |
| S | | | | | | | ☐ Land Survey ☐ | | | | |
| mile | | | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | | | |
| ☐ Household | 6. Dewatering: how many wells? | | | | | | | | | | |
| Lawn & Garden | 7. Aquifer Recharge: well ID | | | | | ☐ Case | ed Uncased | Geotechnica | 1 | | |
| ☐ Livestock | 8. Monitoring: well ID | | | | | | | | | | |
| 2. Irrigation | 9. Environmental Remediation: well ID | | | | | | | | | | |
| 3. ☐ Feedlot | | | | | | b) Open Loop Surface Discharge Inj. of Water | | | | | |
| 4. Industrial | Recovery | ☐ Injec | tion | | | 13. ∐ Othe | er (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) | | | | | | | | | | | |
| □ 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. to ft. | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | | | |
| Nearest source of possible contamination: | | | | | | | | | | | |
| ☐ Septic Tank | ☐ Lateral Line | | | | | ivestock Pens | | icide Storage | | | |
| Sewer Lines | Cess Pool | ☐ Sew | | | | uel Storage | | loned Water \ | Well | | |
| Watertight Sewer Line | | | | | ∐ Fe | ertilizer Stora | ge ∐ Oil We | ell/Gas Well | | | |
| Other (Specify) Direction from well? | | Distance | from w | all? | | | fe | | | | |
| 10 FROM TO | LITHOLOG | | HOIH W | FROM | | | ITHO. LOG (cont.) o | | GINTERVALS | | |
| TO TROM | EIIIOEO | JIC EOG | | 1 ROW | | 10 1 | illio. Eog (cont.) o | 11 Le GGII (| SHVIERVILD | | |
| | | | | | - | | | | | | |
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| No. | | | | | | Notes: | | | | | |
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| | | | | | | | | | | | |
| 11 CONTRACTOR'S | OR LANDOWNER'S | S CERTIFICA | ATION | This w | ater v | well was 🗌 | constructed, rec | onstructed, | or plugged | | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | | | | | |
| Kansas Water Well Cont | ractor's License No | T | his Wa | iter Well l | Recor | rd was comp | pieted on (mo-day-y | ear) | | | |
| under the business name | end one copy to WATEP W | FLL OWNER and | 1 retain | one for your | record | ls Fee of \$5 0 | 0 for each constructed w | ell | | | |
| under the business name of | | | | | | | | | | | |

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