

WATER WELL RI		// W C-5		1002		sion of Wate			W-11 ID			
		e in Well U				irces App. N		Torreshin Numb	Well ID	a Numban		
1 LOCATION OF WATER WELL:		Fraction		/ <sub>4</sub> 1/ <sub>4</sub>	Section Number		r	Township Numb		Range Number R □ E □ W		
County:  2 WELL OWNER: La		74 7		r Direc	1 Addraga	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		ft	5 Latitu	ıde.			(decimal degrees)					
WITH "X" IN	WITH "A" IN  Donth(s) Groundwater Engountered: 1)					8,						
SECTION BOX:	ft or 4)					Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27						
14	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
🗼	□ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr)							ınit make/model:		)		
NW NE								WAAS enabled?		<b>l</b> o)		
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map							
W E	after hours pumping gpr Well water was ft.					☐ Online Mapper:						
SW SE	after hours pumpingg											
	Estimated Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter:	ft. and	Source: Land Survey GPS Topographic Map									
mile	in. to ft.											
7 WELL WATER TO BE USED AS:												
1. Domestic:	<ol><li>Public Wa</li></ol>					10. 🔲 Oil	l Fiel	ld Water Supply: 16	ease			
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 Extr					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial	☐ Recovery		Injection	Latraction	1							
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify):												
Water well disinfected? $\square$ Yes $\square$ No												
8 TYPE OF CASING USED:  Steel PVC Other												
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., From ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
		. ft., From		. ft. to		ft., From .		ft. to	ft.			
Nearest source of possible  ☐ Septic Tank	contamination:  Lateral Line		] Pit Privy		Пτ	ivestock Per	ne	□ Insacti	cide Storage			
Sewer Lines	☐ Cess Pool		] Sewage L	ลฮดดท		Tuel Storage			oned Water			
☐ Watertight Sewer Line						ertilizer Sto			ll/Gas Well			
Other (Specify)												
Direction from well?								ft.				
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LITI	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged												
under my jurisdiction and	UK LANDUWNER'S	O CERTI	rICATIO	IN: This	water	well was L	CO	nstructed, \( \subset  reco	onstructed,	or land ballef		
under my jurisdiction an Kansas Water Well Cont	u was completed on (m	io-uay-yea	aı) Thic W	/ater W/all	ana tr	ns record is	ร เเน ากไอเ	ted on (mo. day w	y Kilowied ear)	ge and bener.		
under the business name of												
KS Department of Health ar	d Environment, Bureau of V	Vater, Geolo	gy Section, 1	000 SW Jac	ekson S	t., Suite 420,	Topel	ka, Kansas 66612-136	7. Telephon	e 785-296-3565.		

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