

WATER WELL R ☐ Original Record ☐		W W C-5	1002	1-10		ion of Water		」 Well∶	ID		
1 LOCATION OF W		e in Well Use Fraction				rces App. No on Number					
County:	AIEK WELL:	1/4 1/4	1/4	1/4	Secu	on Number	Township Num		Range Number □ E □ W		
2 WELL OWNER: La				Dura	1 Addross v						
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:	direction from fedicat town of intersection). If at owner 3 address, effects field.										
Address:											
City:	State:	ZIP:									
3 LOCATE WELL	4 DEPTH OF COM	IPLETED W	ELL:		ft.	5 Latitu	de.		(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) \square I										
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
X	below land surface, measured on (mo-day-yr					□GP	S (unit make/model:	_)		
NW NE	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map						
	Pump test data: Well water was ft.										
W E	after hours pumping gp: Well water was ft.					Online Mapper:					
SW SE	after hours pumping gp										
	Estimated Yield:		SPIII		6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to										
mile		in. to ft.					Other				
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. 🗌 Public Wa	ter Supply: wel	ll ID			10. 🔲 Oil	Field Water Supply:	lease			
☐ Household	6. ☐ Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical					
Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?					
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		_	extraction							
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 JOINTS: Glued Clamped Welded Threaded											
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 ft. to ft., From ft., From ft., From ft. to ft.											
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 Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage											
☐ Septic Tank ☐ Sewer Lines	☐ Lateral Line ☐ Cess Pool		rnvy vage Lag	roon		ivestock Pen uel Storage		doned Wa			
☐ Watertight Sewer Lin				30011		ertilizer Stor					
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) ☐ Oil Well/Gas Well											
Direction from well?								it.			
10 FROM TO	LITHOLOG	GIC LOG		FROM	M	TO 1	LITHO. LOG (cont.)	or PLUG	GING INTERVALS		
Notes:											
11. COMED A CHORDIG OR LANDOWN DRIG CHROWN COLUMN C											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my jurisdiction and was completed on (mo-day-year)											
under the business name	e of	1	ins wa	ici well	NCCO.	iu was coll	picted on (mo-day-	year)			
under the business name of											
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.											