

WATER WELL R		WWC-5 1316	DIV	vision of Water			
				burces App. No.		Well ID	
1 LOCATION OF WATER WELL: County:		Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$		ction Number	Township Number T S	Range Number R $\square$ E $\square$ W	
2 WELL OWNER: Last Name:       First:       Street or Rural Address where well is located (if unknown, distance and							
Business:	last Ivallie.	14151.		tion from nearest town or intersection): If at owner's address, check here:			
Address:							
Address: City: State: ZIP:							
City:     State:     ZIP:       3 LOCATE WELL     4 DUDTH OF GOVERN PERPENDING     6							
WITH "X" IN 4 DEPTH OF COMPLETED WELL:							
SECTION BOX:	Depth(s) Groundwater			Longitude:(decimal degrees)			
Ν		3) ft., or 4)			□ WGS 84 □ NAD 8	33 🔲 NAD 27	
	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:		
NW NE					(WAAS enabled? Yes No)		
	Pump test data: Well water was ft.				□ Land Survey □ Topographic Map		
W E	after hour			Online Mapper:			
SW SE	Well water was ft. after hours pumping gpn						
		gpm	6 Elevat	6 Elevation:ft.  Ground Level  TOC			
S	Estimated Yield:gpm Bore Hole Diameter:in. to				Source:  Land Survey  GPS  Topographic Map		
1 mile	in. to				□ Other		
7 WELL WATER TO BE USED AS:							
1. Domestic: 5.							
Household	en 6. □ Dewatering: how many wells? 7. □ Aquifer Recharge: well ID						
Lawn & Garden			Cased Uncased Geotechnical				
☐ Livestock 2. ☐ Irrigation	8. 🗌 Monitorin 9. Environment		<ul><li>12. Geothermal: how many bores?</li><li>a) Closed Loop ☐ Horizontal ☐ Vertical</li></ul>				
3.  Feedlot				b) Open Loop  Surface Discharge  Inj. of Water			
4. $\Box$ Industrial $\Box$ Recovery $\Box$ Injection 13. $\Box$ Other (specify):							
Was a chemical/bacteriological sample submitted to KDHE?  Yes  No If yes, date sample was submitted:							
Water well disinfected? $\square$ Yes $\square$ No							
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded							
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.							
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No							
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. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to 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							
Separ Lines   Cess Pool   Sewage Lagoon   Fuel Storage   Abandoned Water Well							
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well							
Direction from well? ft.							
						LUGGING INTERVALS	
10 FROM TO	LITHOLO	GIULUG	FROM	10 1	LITHO. LOG (cont.) of P	LUGGING INTERVALS	
ļ ļ	Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged							
under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)							
under the business nam	e 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.							
_	Visit us at <u>http://www.kdheks.gov/waterwell/index.html</u> KSA 82a-1212						