

| WATER WELL RI ☐ Original Record ☐ | | W W C-5 | | 1204 | | sion of Water | | | Wall ID | | |
|--|---|--------------|---------------|----------------|------------------------------------|--|-------------------|--|-----------------------|--------------------------------|--|
| 1 LOCATION OF WA | | e in Well U | | | | rces App. N | | Township Numb | Well ID | naa Numban | |
| | Fraction 1/4 1/4 1/4 1/4 | | | Section Number | | r | Township Numb | er Ra | nge Number □ E □ W | | |
| County: | | 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: | | | | T | | | | | |
| 3 LOCATE WELL | | ft | 5 Latitu | ıde. | | | (decimal degrees) | | | | |
| WITH "X" IN | L Donth(c) (Proundwater Engountered: 1) | | | | | | | | | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) | | | | | | | | | | |
| N | WELL'S STATIC WATER LEVEL: | | | | ft. Source for Latitude/Longitude: | | | | | | |
| | below land surface, | y-yr) | | | PS (u | ınit make/model: | |) | | | |
| NW X - NE | above land surface, measured on (mo-day-yr). Pump test data: Well water was | | | | Land | | | (WAAS enabled? ☐ Yes ☐ No) I Survey ☐ Topographic Map | | | |
| | | | | | | | | | | | |
| WE | after hours pumping gpr | | | | | Online Mapper: | | | | | |
| SW SE | Well water was ft. after hours pumping gp Estimated Yield:gpm | | | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | | |
| | | | | | | | | | | | |
| S | Bore Hole Diameter: in. to ft | | | | | | | | | | |
| 1 mile | | | | Other | | | | | | | |
| 1 mile in. to ft. Uniter | | | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | | | |
| ☐ Household | 6. Dewatering: how many wells? | | | | | | | | | | |
| Lawn & Garden | | | | | | ☐ Ca | sed | ☐ Uncased ☐ □ | Geotechnic | al | |
| ☐ 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 ☐ Injection 13. ☐ Other (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 in. to 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 | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other | | | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | | | |
| Nearest source of possible | | , | | | | , | | | | | |
| ☐ Septic Tank | □ Lateral Line | s 🗆 | Pit Privy | | \Box L | ivestock Per | ns | ☐ Insection | cide Storag | e | |
| ☐ Sewer Lines | Cess Pool | |] Sewage L | | | uel Storage | | | oned Water | | |
| ☐ Watertight Sewer Line | | | Feedyard | | □ F | ertilizer Stor | rage | ☐ Oil We | ell/Gas Wel | 1 | |
| ☐ Other (Specify) | | | | | | | | | | | |
| | | | ance from v | | | | | | | IC DIFFERMAL C | |
| 10 FROM TO | LITHOLOG | ilC LOG | | FRO | M | TO | LIII | HO. LOG (cont.) or | PLUGGII | GINTERVALS | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
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| | | | | Notes | | | | | | | |
| Notes: | | | | | | | | | | | |
| | | | | | | | | | | | |
| 11 CONTRACTOR'S | OR LANDOWNER'S | CERTI | FICATIO | N. This | water | well was F | 7.00 | nstructed \square reco | nstructed | or nlugged | |
| under my jurisdiction and | d was completed on (m | no-dav-ve | ar) | 14. 11118 | water and th | nis record i | s trii | e to the best of m | v knowlea | , or pruggeu lge and belief | |
| Kansas Water Well Cont | ractor's License No | | This W | ater Well | Reco | ord was con | nplet | ted on (mo-day-v | ear) | | |
| under the business name | of | | | | | | | | | | |
| Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed 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. | | | | | | | | | | | |
| KS Department of Health an | a Environment, Bureau of V | vater, Geolo | gy Section, 1 | .000 SW Ja | ekson S | t., Suite 420, ' | ropel | ka, Kansas 66612-136 |)/. Telephoi | ie /85-296-3565. | |

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