

WATER WELL RI  ☐ Original Record ☐		W W C-5		1000		sion of Water			Wall ID			
		e in Well I				irces App. N		Township Numb	Well ID	aga Numbar		
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4 1/4 1/4 1/4			Section Number		r	Township Numb T S		Range Number R □ E □ W		
County:  2 WELL OWNER: La		/4 /		r Duro	1 Addross x	whor	_ ~					
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:										check here.		
Address:												
City:	State:	ZIP:				1						
3 LOCATE WELL		ft	5 I atitu	de.			(decimal degrees)					
WITH "X" IN						,						
SECTION BOA: $(2)$ ft 3) ft or 4)												
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
						☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)						
NW   NE												
	Pump test data: Well water was ft					☐ Land Survey ☐ Topographic Map						
WE	after hours				☐ Online Mapper:							
SW   SE	CTT CT											
lkılıl	pumping gpm				<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC							
S	Estimated Yield:		in. to ft. and			Source: ☐ Land Survey ☐ GPS ☐ Topographic Map						
1 mile												
1 mile  in. to ft. Uniter												
1. Domestic: 5. Public Water Supply: well ID												
☐ Household	6. ☐ Dewatering: how many wells?											
☐ Lawn & Garden 7. ☐ Aquifer Recharge: well II						☐ Cased ☐ Uncased ☐ Geotechnical						
☐ Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?						
2. Irrigation	9. Environmental Remediation: well ID											
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext					1	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., 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)												
								otner (Specify)	• • • • • • • • • • • • • • • • • • • •			
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)  SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible		. 10., 1 10111		. 11. 10		10, 110111 .						
☐ Septic Tank	Lateral Line	s [	☐ Pit Privy			ivestock Per	ıs	☐ Insection	cide Storage	è		
Sewer Lines	Cess Pool		_ ☐ Sewage La	agoon		uel Storage			oned Water			
☐ Watertight Sewer Line			Feedyard		$\Box$ F	ertilizer Stor	rage	☐ Oil We	ll/Gas Well			
Other (Specify)												
Direction from well?												
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LITH	IO. LOG (cont.) or	PLUGGIN	G INTERVALS		
				37.								
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
under my jurisdiction and	OK LANDOWNER'S	O CERTI	FICATIO.	IN: This	water	well was _	con	istructed, $\sqsubseteq$ reco	onstructed,	or i plugged		
under my jurisdiction and Kansas Water Well Cont	u was completed on (m	io-uay-ye	Thic W	ater Well	anu ti Reco	ns record is	s urue mlet	ed on (mo. day y	y Kilowied ear)	ge and benen.		
under the business name of												
KS Department of Health an										e 785-296-3565.		

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