

| WATER WELL R ☐ Original Record ☐ | | W W C-5 | 1210 | _ | | ion of Water | | | Well ID | | |
|---|---|---------------------------|-----------|-----------|---|---|---------|---------------------|--------------|-------------------|--|
| | | e in Well Use Fraction | | | | rces App. No | | ounchin Numb | | aga Numbar | |
| 1 LOCATION OF WATER WELL: County: | | 1/4 1/4 1/4 | | 1/4 | Section Number | | 1 | ownship Numb T S | er Ran R | _ | |
| 2 WELL OWNER: La | | | | Dura | 1 Addross v | whore | - ~ | | | | |
| | | | | | | | | | | | |
| Business: direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | | | | |
| Address: | | | | | | | | | | | |
| City: | State: | ZIP: | | | | T | | | | | |
| 3 LOCATE WELL | 4 DEPTH OF COM | PLETED W | ELL: | | ft | 5 Latitu | de. | | | (decimal degrees) | |
| WITH "X" IN | Depth(s) Groundwater Encountered: 1) | | | | | ft. 5 Latitude:(decimal degrees) Longitude:(decimal degrees) | | | | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) \square I | | | | | | | | | | |
| | 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) | | | | | ☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No) | | | | | |
| NW NE | | | | | | | | | | | |
| | Pump test data: Well water was ft. | | | | ☐ Land Survey ☐ Topographic Map | | | | | | |
| 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 | | | | and Source: Land Survey GPS Topographic | | | | | | |
| mile | in. to ft. | | | | | □ O41 | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | |
| 1. Domestic: | 5. 🗌 Public Wa | ter Supply: wel | ll ID | | | 10. 🗌 Oil | Field | Water Supply: 16 | ease | | |
| ☐ Household | 6. ☐ Dewatering: how many wells? | | | | | | | | | | |
| Lawn & Garden | 7. Aquifer Recharge: well ID | | | | | | | | | | |
| Livestock | 8. Monitoring: well ID | | | | | | | how many bores | | | |
| 2. Irrigation | 9. Environmental Remediation: well ID | | | | | a) Closed Loop | | | | | |
| 3. ☐ Feedlot 4. ☐ Industrial | ☐ Air Sparge ☐ Soil Vapor Extr ☐ Recovery ☐ Injection | | | | ction b) Open Loop Surface Discharge Inj. of Water 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 | | | | | | | | | | | |
| 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. to ft. | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | | | |
| Nearest source of possible Septic Tank | e contamination: Lateral Line | es 🔲 Pit | Deixa | | Пτ | ivestock Pen | NG. | □ Incoctic | cide Storage | | |
| Sewer Lines | ☐ Cess Pool | | vage Lag | roon | | uel Storage | 15 | | oned Water | | |
| ☐ Watertight Sewer Lin | | | | 50011 | | ertilizer Stor | age | | ll/Gas Well | | |
| Other (Specify) | | | | | | | | | | | |
| Direction from well? | | Distance | from we | ell? | | | | ft. | | | |
| 10 FROM TO | LITHOLOG | GIC LOG | | FROM | M | TO | LITHO | D. LOG (cont.) or | PLUGGIN | G INTERVALS | |
| | | | | | | | | | | | |
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| Notes: | | | | | | | | | | | |
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| 11 CONTRACTORIS OR LANDOWNER OF CERTIFICATION TO THE CONTRACTORIS OF THE CONTRACTORIS | | | | | | | | | | | |
| 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) | | | | | | | | | | | |
| Kansas Water Well Contractor's License No | | | | | | | | | | | |
| 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 a | nd Environment, Bureau of W | Vater, Geology Se | ction, 10 | 00 SW Jac | kson St | t., Suite 420, 7 | Гореka, | Kansas 66612-136 | 7. Telephon | e 785-296-3565. | |