

WATER WELL RI		W W C-5		1240		sion of Wate			W-11 ID		
		e in Well U				rces App. N		Township Numb	Well ID	naa Numbar	
1 LOCATION OF WATER WELL:		Fraction		/ ₄ 1/ ₄	Section Number		r	Township Numb		Range Number R □ E □ W	
County:		74 7		. D.1200	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	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)					ft. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I										
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	□ below land surface,	y-yr)			PS (u	ınit make/model:)			
NW NE	above land surface, measured on (mo-day-yr)						(V	VAAS enabled?	Yes 🔲	No)	
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
WE	afterhours pumpinggp: Well water wasft.					Online Mapper:					
SW SE	after hours										
	Estimated Yield:		••••••	. gpm	6 Elevation			:ft	. 🔲 Groun	d Level 🔲 TOC	
S	Bore Hole Diameter:	ft. and	Source: Land Survey GPS Topographic Map								
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. Public Wa	ter Supply	: well ID			10. 🔲 Oil	l Fiel	d Water Supply: 16	ease		
☐ Household	6. Dewatering: how many wells?										
☐ Lawn & Garden	7. ☐ Aquifer Recharge: well ID										
Livestock	8. Monitoring: well ID										
2. Irrigation	9. Environmental Remediation: well ID					a) Closed Loop Horizontal Vertical					
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?											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter											
Casing height above land surface											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) ☐ 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)											
	☐ Key Punched ☐ W					ne (Open H		outer (Speeing)			
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.											
9 GROUT MATERIAL: Neat cement Dement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible											
☐ Septic Tank	☐ Lateral Line		Pit Privy			ivestock Per			cide Storag		
☐ Sewer Lines	Cess Pool		Sewage L			uel Storage			oned Water		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)											
Direction from well?								ft			
10 FROM TO	LITHOLOG		ance moni v	FRO				HO. LOG (cont.) or		JG INTERVALS	
TO TROW	EITHOLOG	JIC LOG		TRO	IVI	10	LIII	.10. LOG (cont.) of	LUGGII	TO ITTER VILLS	
				Notes	<u> </u>						
11 CONTRACTOR'S	OR LANDOWNER'S	CERTI	FICATIO	N: This	water	well was	co	nstructed, \square reco	onstructed	, or plugged	
under my jurisdiction an	under my jurisdiction and was completed on (mo-day-year)										
Kansas Water Well Cont	tractor's License No		This W	ater Well	Reco	rd was con	nplet	ted on (mo-day-y	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 <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.											

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