

WATER WELL		WWC-5 1314	DIV	ision of Water		
				11		/ell ID
1 LOCATION OF WATER WELL:		Fraction		tion Number	Township Number	Range Number
County:						
2 WELL OWNER: L Business:			ral Address where well is located (if unknown, distance and			
Business: direction from nearest town or intersection): If at owner's address, check here:						
Address:						
City: State: ZIP:						
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL: ft. 5 Latitude:						
WITH "X" IN	Depth(s) Groundwater		Longitude:(decimal degrees)			
SECTION BOX: N		3) ft., or 4)		Datum: WGS 84 NAD 83 NAD 27		
	WELL'S STATIC WA	TER LEVEL:	ft.	Source for Latitude/Longitude:		
	→ below land surface, measured on (mo-day-y above land surface, measured on (mo-day-y					
NW NE			(WAAS enabled? \Box Yes \Box No)			
	Pump test data: Well		□ Land Survey □ Topographic Map □ Online Mapper:			
W E		after hours pumping gpm Well water was ft.			ne Mapper:	
SW	after hours pumping gpm					
	Estimated Yield:		6 Elevation:ft. Ground Level TOC			
S	Bore Hole Diameter: .		Source: Land Survey GPS Topographic Map			
1 mile in. to ft. □ Other						
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease						
1. Domestic:		ater Supply: well ID ng: how many wells?		10. ☐ Oil Field Water Supply: lease 11. Test Hole: well ID		
Lawn & Garden			\Box Cased \Box Uncased \Box Geotechnical			
	7. Aquifer Recharge: well ID			12. Geothermal: how many bores?		
2. Irrigation	9. Environmental Remediation: well ID			a) Closed Loop \Box Horizontal \Box Vertical		
3. 🗌 Feedlot	☐ Air Sparge ☐ Soil Vapor Extract			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 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. to ft.						
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other						
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.						
Nearest source of possible contamination:						
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well						
Sewer Lines Cess Fool Sewage Lagoon Her Storage Abandoned water went Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well						
□ Other (Specify)						
Direction from well? ft.						
10 FROM TO	LITHOLO	GIC LOG	FROM	TO LI	THO. LOG (cont.) or PL	UGGING INTERVALS
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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						
under the business nam	e of				for each an et ==	
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						