

| WATER WELL RI   |   | W W C-5     |             | 0201           |  | sion of Wate                                   |                   |                           | W-11 ID               |                |  |
|---|---|-------------|-------------|----------------|--|--|-------------------|---------------------------|-----------------------|----------------|--|
| Original Record    1 LOCATION OF WA   |   | e in Well U |             |                |  | rces App. N                                    |                   | Township Numb             | Well ID               | naa Numbar     |  |
| County:   | Fraction 1/4 1/4 1/4 1/4  |             |             | Section Number |  | r  | Township Numb     | er Ra                     | nge Number<br>□ E □ W |                |  |
| - v   |   | /4 /        |             | . D.1200       | 1 Addraga                                    | 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:  |   |             |             |                |  |  |                   |                           |                       |                |  |
| Address:  |   |             |             |                |  |  |                   |                           |                       |                |  |
| City:   | State:  | ZIP:        |             |                |  | 1  |                   |                           |                       |                |  |
| 3 LOCATE WELL   |   | ft          | 5 Latitu    | ıde.           |  |  | (decimal degrees) |                           |                       |                |  |
| WITH "X" IN   | L Donth(c) (Proundwater Encountered: 1)   |             |             |                |  |  |                   |                           |                       |                |  |
| SECTION BOX:  | 2) ft. 3) ft., or 4)  |             |             |                |  |  |                   |                           |                       |                |  |
| N   | WELL'S STATIC WATER LEVEL:  |             |             |                | t. Source for Latitude/Longitude:            |  |                   |                           |                       |                |  |
|   | <ul><li>□ below land surface, measured on (mo-day-yr)</li><li>□ above land surface, measured on (mo-day-yr)</li></ul>   |             |             |                |  |  | PS (u             | ınit make/model:          |                       | )              |  |
| NW NE   |   |             |             |                |  |  | (V                | VAAS enabled?             | Yes 🔲                 | No)            |  |
|   | Pump test data: Well water was ft.  |             |             |                | ☐ Land Survey ☐ Topographic Map              |  |                   |                           |                       |                |  |
| WE  | after hours pumping   |             |             |                |  | Online Mapper:                                 |                   |                           |                       |                |  |
| SW SEX -  | Well water was ft. after hours pumping gp   |             |             |                |  |  |                   |                           |                       |                |  |
|   | Estimated Yield:gpm   |             |             |                | <b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC |  |                   |                           |                       |                |  |
| S   | Bore Hole Diameter: in. to ft.  |             |             |                | Source: Land Survey GPS Topographic Map      |  |                   |                           |                       |                |  |
| mile  |   | ft.         |             | Other          |  |  |                   |                           |                       |                |  |
| 7 WELL WATER TO BE USED AS:   |   |             |             |                |  |  |                   |                           |                       |                |  |
| 1. Domestic: 5. Public Water Supply: well ID  |   |             |             |                |  |  |                   |                           |                       |                |  |
| ☐ Household   | 6. ☐ Dewatering: how many wells?  |             |             |                |  |  |                   |                           |                       |                |  |
| ☐ Lawn & Garden   | <u> </u>  |             |             |                |  |  |                   |                           |                       |                |  |
| Livestock   | 8. Monitoring: well ID  |             |             |                |  |  |                   |                           |                       |                |  |
| 2. Irrigation   | 9. Environmental Remediation: well ID   |             |             |                |  |  |                   |                           |                       |                |  |
| 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext  |   |             |             |                | l  | 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)   |   |             |             |                |  |  |                   |                           |                       |                |  |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)  |   |             |             |                |  |  |                   |                           |                       |                |  |
| 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 monity | FRO            |  |  |                   | HO. LOG (cont.) or        |                       | JG INTERVALS   |  |
| TO TROM   | EITHOLOG  | JIC LOG     |             | TRO            | IVI  | 10   | LIII              | 110. EOG (cont.) of       | LUGGII                | TO ITTER VILLS |  |
|   |   |             |             |                |  |  |                   |                           |                       |                |  |
|   |   |             |             |                |  |  |                   |                           |                       |                |  |
|   |   |             |             |                |  |  |                   |                           |                       |                |  |
|   |   |             |             |                |  |  |                   |                           |                       |                |  |
|   |   |             |             |                |  |  |                   |                           |                       |                |  |
|   |   |             |             | Notes          | <u> </u>                                     |  |                   |                           |                       |                |  |
|   |   |             |             |                |  |  |                   |                           |                       |                |  |
|   |   |             |             |                |  |  |                   |                           |                       |                |  |
| 11 CONTRACTOR'S   | OR LANDOWNER'S  | S CERTII    | FICATIO     | N: This        | water  | well was                                       | co                | nstructed, $\square$ reco | onstructed            | , or plugged   |  |
| 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   | OI  | ELL OWNE    | D and mate: | ono for v      |  | de For of ¢ f                                  | 00 f-             | or anah annat matad       |                       |                |  |
|   | 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