

WATER WELL RI ☐ Original Record ☐		W W C-5	_	5-105		ion of Water			Wall ID		
		e in Well Us	se			rces App. N		Township Numb	Well ID	naa Numban	
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W	
2 WELL OWNER: La		/4 /		r Duro	1 Addross v	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:				Т					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	Llooth(c) (Proundwater Engountared: 1)					8,					
SECTION BOX:	TION BOX: (2) ft 3) ft or 4)										
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	 below land surface, 	/-yr)			PS (u	ınit make/model:)			
NW NE	□ above land surface, measured on (mo-day-yr) Pump test data: Well water was						(V	VAAS enabled?	Yes 🔲 I	No)	
								d Survey			
WE						☐ Oı	☐ Online Mapper:				
SW SE	after hours				-						
	Estimated Yield:			. gpm	6 Elevation			:ft	. 🔲 Groun	d Level 🔲 TOC	
S	Bore Hole Diameter: in. to ft				nd Source: ☐ Land Survey ☐ GPS ☐ Topographic Map						
mile		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	<u> </u>							☐ Uncased ☐ □			
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 ☐ Steinless 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 Storage		
☐ Sewer Lines	Cess Pool		Sewage La			uel Storage			oned Water		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well											
Direction from well?								ft			
10 FROM TO	LITHOLOG		ice mom v	FRO				HO. LOG (cont.) or		IG INTERVALS	
TO TROM	EITHOLOG	JIC LOG		TRO	IVI	10	L/111	.10. LOG (cont.) of	LUGGII	IO IIVIERVALD	
				Notes							
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	ICATIO	N: This v	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	OI	ELL OWNER	and matain	one for v		de Fee ef # F	00 f-	or analy constructed			
	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