

WATER WELL R ☐ Original Record ☐		W W C-5	1004			ion of Water			Well ID			
	<u> </u>	e in Well Use Fraction				rces App. No		unchin Numb		aga Numbar		
1 LOCATION OF WATER WELL:				1/4	Section Number		10	Township Number		Range Number R		
County: 2 WELL OWNER: La	First:			Duro	al Address where well is located (if unknown, distance and							
Business: direction from nearest town or intersection): If at owner's addre												
Address:	direction from measure own or intersection). If all owners of decireos, effects from											
Address:												
City:	State:	ZIP:				1						
3 LOCATE WELL	4 DEPTH OF COM	IPLETED W	ELL:		. ft.	5 Latitu	de.			(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				Dry Well Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:							
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I											
11	WELL'S STATIC WATER LEVEL:											
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)						
NW NE X	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map					(o)		
	Pump test data: Well water was ft.											
W E	after hours pumping gp Well water was ft.					Online Mapper:						
SW SE	after hours pumping gp											
	Estimated Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to											
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 W	ater Supply: 16	ease			
☐ Household	6. ☐ Dewatering: how many wells?											
Lawn & Garden	7. Aquifer Recharge: well ID											
Livestock	8. Monitoring: well ID							ow many bores				
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID				•••	a) Closed Loop						
4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapor Extr☐ Recovery ☐ Injection					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?												
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., From ft., From ft., From ft., From ft., From ft., From												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
		ft., From	1	t. to	• • • • • •	ft., From .		ft. to	ft.			
Nearest source of possible Septic Tank	e contamination: Lateral Line	es 🔲 Pit	Deixa		пт:	ivestock Pen	16	□ Insocti	cide Storage			
Sewer Lines	☐ Cess Pool			non			15					
☐ Watertight Sewer Lin												
Other (Specify)												
Direction from well?		Distance	from we	:11?				ft.				
10 FROM TO	LITHOLOG	GIC LOG		FROM	1	TO 1	LITHO.	LOG (cont.) or	PLUGGIN	G INTERVALS		
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
under my jurisdiction ar	OK LANDOWNER'S	o day yeer)	ATION	: Ihis w	ater v	well was L	constr	ucted, I reco	onstructed,	or plugged		
Kansas Water Well Con	u was completed on (III tractor's License No	(To-uay-year	his Wa	a ter Well 1	iiu iii Recoi	ns record is	nleted a	n (mo-day-ya	y Kilowied ear)	ge and benen.		
under the business name	e of											
under the business name of												
KS Department of Health a	nd Environment, Bureau of W	Vater, Geology Se	ection, 100	00 SW Jack	son St	., Suite 420, T	Горека, К	Cansas 66612-136	7. Telephone	785-296-3565.		

Visit us at http://www.kdheks.gov/waterwell/index.html

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