

WATER WELL RI ☐ Original Record ☐		W W C-5		7 000		ion of Water			Wall ID			
1 LOCATION OF WA		e in Well U				rces App. N		Township Numb	Well ID	nga Numban		
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		Γ	Township Numb		Range Number R □ E □ W			
- v		74 7		. D.1200	1 Addragg	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:										
3 LOCATE WELL	4 DEPTH OF COM		ft	5 Latitu	de.			(decimal degrees)				
WITH "X" IN	Donth(s) Groundwater Engountered: 1)					8						
SECTION BOX:	N 2) ft. 3) ft., or 4) \square 1					Ory Well Datum: □ WGS 84 □ NAD 83 □ NAD 27						
	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:							
	below land surface,			□GI	PS (u	nit make/model:	• • • • • • • • • • • • • • • • • • • •)				
NW NE	above land surface, measured on (mo-day-yr)				• • • • • • •			VAAS enabled? □		No)		
	Pump test data: Well water was ft. after hours pumping				☐ Land Survey ☐ Topographic Map							
E E	Well water was ft.					☐ Online Mapper:						
SW SE	after hours pumpin											
<u> X </u>	gpm	gpm					n:ft. Ground Level TOC					
S	Bore Hole Diameter:	ft. and	ad Source: Land Survey GPS Topographic Map									
mile	in. to ft.											
7 WELL WATER TO BE USED AS:												
1. Domestic:	5. Public Wa							d Water Supply: 16				
Household	6. ☐ Dewatering: how many wells?											
☐ Lawn & Garden ☐ Livestock	<u> </u>											
2. Irrigation	8. Monitoring: well ID											
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extr											
4. ☐ Industrial	☐ Recovery		Injection		=			specify):				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected? \square Yes \square No												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter in. to												
Casing height above land surface												
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												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		. 10., 1 10111	••••••	. 10. 00		10., 1 10111 .						
☐ Septic Tank	☐ Lateral Line	s 🗆	Pit Privy		□L	ivestock Per	ıs	☐ Insection	cide Storag	e		
☐ Sewer Lines	☐ Cess Pool		Sewage L		□F	uel Storage			oned Water			
☐ Watertight Sewer Line			Feedyard		☐ F	ertilizer Stor	rage	☐ Oil We	ll/Gas Wel	1		
☐ Other (Specify)												
			ance from v							IC DITEDMALC		
10 FROM TO	LITHOLOG	JIC LUG		FRO	IVI	TO	LIII	HO. LOG (cont.) or	PLUGGI	GINTERVALS		
				Notes	<u> </u>							
11 CONTRACTOR'S	OR LANDOWNER'S	CERTI	FICATIO	N: This	water	well was	COI	nstructed, \square reco	onstructed	, or plugged		
under my jurisdiction an	d was completed on (m	no-day-ye	ar)		and th	nis record is	s true	e to the best of m	y knowled	lge and belief.		
Kansas Water Well Cont												
under the business name of												
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed 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