

WATER WELL RI		W W C-5	1022	_ 1 10		ion of Water			Wall ID			
		e in Well U	se			rces App. N		Township Numb	Well ID	ana Numban		
1 LOCATION OF WATER WELL: County:		Fraction			Section Number		[Township Numb T S		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:										check here.		
Address:												
City:	State:	ZIP:				T						
3 LOCATE WELL	4 DEPTH OF COM	IPLETED	WELL:		ft	5 Latitu	de.			(decimal degrees)		
WITH "X" IN	WITH "A" IN Donth(s) Groundwater Engountered: 1)											
SECTION BOX:	SECTION BOX: ft 3) ft or 4)					Dongrade(decimal degrees)						
14	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
						GPS (unit make/model:						
NW NE								/AAS enabled?		√ o)		
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
W E	after hours pumping g Well water was ft.					☐ Online Mapper:						
SW SE		g gpm										
x	Estimated Yield:			· spin				ft	. 🔲 Ground	d Level 🔲 TOC		
S	Bore Hole Diameter: in. to f				nd Source: ☐ Land Survey ☐ GPS ☐ Topographic Ma							
mile		ft.	☐ Other									
7 WELL WATER TO BE USED AS:												
1. Domestic:	Dublic Wa							d Water Supply: 16				
Household												
Lawn & Garden	<u> </u>											
Livestock	8. Monitoring: well ID							l: how many bores				
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extr					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial	☐ Recovery		njection	Extraction	l							
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												
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)												
	☐ Key Punched ☐ W					ne (Open Ho						
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.												
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 .		. ft. to	• • • • • • • • • • • • • • • • • • • •	ft., From .	• • • • • •	ft. to	ft.			
Nearest source of possible			Die Dairer			irrasta alz Dan		□ Incocti	aida Stanaa			
☐ Septic Tank ☐ Sewer Lines	☐ Lateral Line ☐ Cess Pool		Pit Privy Sewage La	agoon		ivestock Per uel Storage	18		cide Storage oned Water			
☐ Watertight Sewer Line						ertilizer Stor	age		ell/Gas Well			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)												
Direction from well?								ft.				
10 FROM TO	LITHOLOG			FRO				IO. LOG (cont.) or		G INTERVALS		
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	TCATIO	N: This v	water v	well was	cor	istructed, \square reco	onstructed,	or □ plugged		
under my jurisdiction an Kansas Water Well Cont	u was completed on (m	io-uay-yea	I) Thic W	ator Wall	and th	us record is	s true	e to the best of m	y knowled	ge and benef.		
under the business name of												
KS Department of Health ar										e 785-296-3565.		

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html