

WATER WELL RI  ☐ Original Record ☐		W W C-5		0000		sion of Wate			Wall ID			
		e in Well U				irces App. N		Torrachia Numb	Well ID	ana Numban		
1 LOCATION OF WATER WELL: County:		Fraction		/ <sub>4</sub> 1/ <sub>4</sub>	Section Number		r	Township Numb		Range Number R □ E □ W		
2 WELL OWNER: La		/4 /		r Duro	1 Addross	who						
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:				1						
3 LOCATE WELL	4 DEPTH OF COM	IPLETEI	WELL:		ft	5 Latitu	ıde.			(decimal degrees)		
WITH "X" IN	Donth(s) Groundwater Engagement (1)											
SECTION BOX:	SECTION BOX: $(1, 2)$ ft or $(1)$					Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27						
	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:							
	☐ below land surface,		GPS (unit make/model:)					)				
NW   NE	above land surface, measured on (mo-day-yr)				• • • • • • • • • • • • • • • • • • • •			WAAS enabled?		<b>√</b> o)		
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
W E	after hours pumping gp. Well water was ft.					Online Mapper:						
SW SE	after hours											
	Estimated Yield:			. 5pm		6 Eleva	tion	:ft	. 🔲 Ground	d Level 🔲 TOC		
S	Bore Hole Diameter: in. to f				nd Source: Land Survey GPS Topographic Map							
mile		ft.	☐ Other									
7 WELL WATER TO BE USED AS:												
1. Domestic:	<ol><li>Public Wa</li></ol>							ld Water Supply: 16				
Household	6. Dewatering: how many wells?											
Lawn & Garden	7. Aquifer Recharge: well ID											
Livestock	8. Monitoring: well ID											
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		Injection	Extraction	1							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
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. 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 Deirer		Πт	iveate als Da		□ Inconti	aida Stanaa			
☐ Septic Tank ☐ Sewer Lines	☐ Lateral Line☐ Cess Pool		] Pit Privy ] Sewage L	agoon		ivestock Per Juel Storage			cide Storage oned Water			
☐ Watertight Sewer Line						ertilizer Sto			ell/Gas Well			
Other (Specify)		ــــــــــــــــــــــــــــــــــــــ				cranzer sto	ruge		in ous wen			
Direction from well?								ft.				
10 FROM TO	LITHOLOG			FRO				HO. LOG (cont.) or		G INTERVALS		
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
11 CONTRACTOR'S	UR LANDOWNER'S	S CERTI	FICATIO	N: This	water	well was	_ co	onstructed, $\coprod$ reco	onstructed,	or □ plugged		
under my jurisdiction and Kansas Water Well Cont	u was completed on (m	ю-aay-yea	ar) Thic W	ater Wall	ana th	ns record 1	s tru	ted on (mo day w	y knowled	ge and benef.		
under the business name of												
KS Department of Health an										e 785-296-3565.		

KSA 82a-1212