

WATER WELL R ☐ Original Record ☐		W W C-5	1210			ion of Water	I		Well ID		
		e in Well Use Fraction				rces App. No		unchin Numb		nga Numbar	
1 LOCATION OF WATER WELL: County:		1/4 1/4 1/4		1/4	Section Number			Township Number		Range Number R	
2 WELL OWNER: La			-	Duro	Il Address where well is located (if unknown, distance and						
Address:	direction from nearest to will of intersection). If at owner is address, effect from										
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM	IPLETED WE	III:		ft	5 Latitu	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				1	. ft. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I										
17	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	□ below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr)					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)					
NW NE					••••						
	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 pumping gp										
	Estimated Yield:		5P		6 Elevation:ft. Ground Level TOC						
S	Bore Hole Diameter: in. to				. and Source: Land Survey GPS Topographi						
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:		ter Supply: well									
Household	6. Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical					
☐ Livestock 2. ☐ Irrigation	8. Monitoring: well ID					12. Geothermal: how many bores?					
3. ☐ Feedlot	9. Environmental Remediation: Well ID ☐ Air Sparge ☐ Soil Vapor Extra				••••	a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery		_								
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											
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:											
		auze Wrapped						r (Specify)			
	☐ Key Punched ☐ W					ne (Open Ho		6 17	6		
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		It., FIOIII	1	1. 10		11., F10111 .		11. 10	It.		
Septic Tank	Lateral Line	es 🔲 Pit F	Privv		□Li	ivestock Pen	.s	☐ Insection	cide Storage	2	
☐ Sewer Lines	Cess Pool	☐ Sew		oon		uel Storage			oned Water		
☐ Watertight Sewer Lin		☐ Feed	lyard		☐ Fe	ertilizer Stor	age	☐ Oil We	ll/Gas Well	:	
☐ Other (Specify)											
Direction from well?			rom we								
10 FROM TO	LITHOLOG	FIC LOG		FROM	1	TO 1	LITHO. I	LOG (cont.) of	PLUGGIN	IG INTERVALS	
					-						
					-						
					-						
					-						
				Notes:							
11063.											
				1							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Con	tractor's License No	T1	his Wat	ter Well	Recoi	rd was com	pleted o	on (mo-day-y	ear)		
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.										
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