| WATER WELL R | | WWC-5 ge in Well Use | | ision of Water urces App. No | | /ell ID | |
|--|---------------------------------------|-----------------------------|----------------|---------------------------------|--|---|--|
| 1 LOCATION OF WA | | T | T a | tion Number | | Range Number | |
| County: Stold | runce | Fraction 1/45W 1/41 | 1/4 6 | JLF | T 2 1s | R D E WW | |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown distance and | | | | | | | |
| Business: Address: Address: direction from nearest town or intersection): If at owner's address, check here: | | | | | | | |
| Address: | 118 W Har | ather Cir | | 12718 W Hard +ner Cir | | | |
| City: | Witz State: KS | 2 ZIP: 67235 | | L | Chita, KG (| 07235 | |
| 3 LOCATE WELL | 1 | APLETED WELL: | 53 4 | | , | , , , , , , , , , , , , , , , , , , , | |
| WITH "X" IN | | Encountered: 1) | | | de: | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) | | | | ude: | | |
| IN . | WELL'S STATIC WA | TER LEVEL / X | ft | | for Latitude/Longitude: | LI NAD 27 | |
| | Pump test data: Well water was ft | | | r) | |) | |
| NW NE | | | | | | | |
| * | | | | | | | |
| E | Well | | Online Mapper: | | | | |
| SW SE | after hours pumping gpm | | | | _ | | |
| | Estimated Yield: 2.01gpm | | | | ion:ft. 🔲 | | |
| S | S Bore Hole Diameter: in. to | | | Source: | | | |
| 1 III W | | | | | | | |
| 7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID | | | | | | | |
| Household | | ng: how many wells? | | 10. [_] Oil | Field Water Supply: lease | *************************************** | |
| Lawn & Garden | 7. Aquifer Recharge: well ID | | | 11. Test Hole: well ID | | | |
| Livestock | 8. Monitoring: well ID | | | | 12. Geothermal: how many bores? | | |
| 2. Irrigation | 9. Environmental Remediation: well ID | | | a) Closed Loop | | | |
| 3. Feedlot Air Sparge Soil Vapor Ext | | | xtraction | | en Loop Surface Discha | | |
| 4. Industrial Recovery Injection 13. Other (specify): | | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: | | | | | | | |
| Water well disinfected? ☐ Yes ☐ No 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other | | | | | | | |
| Casing diameter in to the Diameter in to the Diameter in to the Diameter in to the Diameter in | | | | | | | |
| Casing diameter in. to ft., Diameter in. to ft. Diameter in. to ft. Casing height above land surface in. Weight bis./ft. Wall thickness or gauge No. 100 that. | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) | | | | | | | |
| | anized Steel | crete tile \text{None us} | sed (open hole | 2) | | | |
| SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous Slot | | | | | | | |
| ☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Mentonite Other | | | | | | | |
| Grout Intervals: From | | | | | | | |
| Nearest source of possible contamination: ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage | | | | | | | |
| ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well | | | | | | | |
| *Watertight Sewer Lines | | | | | | | |
| Other (Specify) Direction from well? Distance from well? | | | | | | | |
| Direction from well? | =A50 | Distance from we | | | | | |
| 10 FROM TO | LITHOLO | GIC LOG | FROM | TO I | LITHO. LOG (cont.) or PL | UGGING INTERVALS | |
| | TOP 301 | | | | | | |
| 1 2 2 3 1 | - Hayes | | | | 711WMAAAAW777AAAA | **** | |
| 30 53 | Mrd 50 | | | | A second | | |
| | | Fw. | | | the manufacture of the state of | | |
| | | | | | | | |
| | 770 F71 | | Notes: | | | , 3000 300 300 | |
| | | | | | | | |
| 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) | | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | |
| under the business name of | | | | | | | |
| INSTRUCTIONS: Send one copy to WATER WELL WNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topcka, Kansas 66612-1367. Telephone (785) 296-3565. | | | | | | | |
| | ks.gov/waterwell/index.html | , 223.085 200.001, 1000 | KSA 82a-12 | | | Revised 9/10/2012 | |