

WATER WELL RI		W W C-5		3100		ion of Water			W-11 ID		
		e in Well Us	se			rces App. N		Township Numb	Well ID	n an Mumban	
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4 1/4 1/4 1/4		4 1/4	Section Number		r	Township Numb		Range Number R	
County:		74 7		r D1180	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		ft	5 Latitu	de.			(decimal degrees)				
WITH "X" IN	L Donth(c) (Proundwater Encountered: 1)					8,					
SECTION BOX:	SECTION BOX: (3) ft or (4)					Editate:					
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	 below land surface, 	y-yr)				nit make/model:)			
NW NE	above land surface, measured on (mo-day-yr)						(V	VAAS enabled?] Yes 🔲 l	No)	
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
WE	after hours pumping gp Well water was ft.					☐ Online Mapper:					
sw -Xse			iggpm								
	Estimated Yield:						tion:	ft	. Ground Level TOC		
S	Bore Hole Diameter: in. to f									opographic Map	
1 mile			Other								
1 mile in. to ft. Uniter											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. ☐ Dewatering: how many wells?										
☐ Lawn & Garden	Lawn & Garden 7. ☐ Aquifer Recharge: well ID										
☐ Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?						
2. Irrigation	9. Environmental Remediation: well ID										
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext					1	b) Open Loop					
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?											
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:											
SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot											
								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											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible		,				,					
☐ Septic Tank	Lateral Line		Pit Privy			ivestock Per			cide Storage		
☐ Sewer Lines	☐ Cess Pool		Sewage La			uel Storage		· · · · · · · · · · · · · · · · · · ·	oned Water		
☐ Watertight Sewer Line			Feedyard		☐ F	ertilizer Stor	rage	☐ Oil We	ell/Gas Well		
☐ Other (Specify)											
			nce from w							IC INTERMALC	
10 FROM TO	LITHOLOG	JIC LUG		FRO	M	TO	LIII	HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
					-						
					-						
				Notes	٠.						
110165.											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my jurisdiction an	d was completed on (m	no-dav-vea	r)	11119	and th	nis record is	s true	e to the best of m	v knowled	ge and belief.	
Kansas Water Well Cont	ractor's License No		. This W	ater Well	Reco	rd was con	plet	ed 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.											
KS Department of Health ar	a Environment, Bureau of V	vater, Geolog	y Section, 1	uuu SW Jac	ckson S	t., Suite 420, '	ı opek	ka, Kansas 66612-136	 relephon 	e /85-296-3565.	

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