

WATER WELL RI ☐ Original Record ☐		W W C-5		37 00		ion of Wate			Wall ID		
		e in Well U				rces App. N		Tourship Numb	Well ID	aga Numbar	
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W	
2 WELL OWNER: La		74 7		. D.1200	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:											
Address:											
City:	State:	ZIP:									
3 LOCATE WELL	4 DEPTH OF COM	IPLETEI	WELL:		ft	5 Latitu	ıde.			(decimal degrees)	
WITH "A" IN Donth(s) Groundwater Encountered: 1)					8,						
SECTION BOX: 2)					Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27						
14	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:						
	☐ below land surface,			G	PS (ı	ınit make/model:	·)			
¥ - NW NE	□ above land surface, measured on (mo-day-yr) Pump test data: Well water was							WAAS enabled?		√o)	
1								nd Survey Topographic Map			
W E						☐ Online Mapper:					
SW SE	after hours										
	Estimated Yield:			. 5P111		6 Elevation:ft. ☐ Ground 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:	Public Wa					10. 🔲 Oi	l Fie	ld Water Supply: 16	ease		
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										
4. ☐ Industrial	☐ Recovery		Injection	Extraction	I						
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											
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 H					
SCREEN-PERFORATED INTERVALS: From ft. to ft. to ft., From ft., From 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	irvanta als Da		□ Imagati	aida Stamaga		
☐ Septic Tank ☐ Sewer Lines	☐ Lateral Line☐ Cess Pool] Pit Privy] Sewage L	agoon		ivestock Per uel Storage			cide Storage oned Water		
☐ Watertight Sewer Line						ertilizer Sto			ell/Gas Well		
Other (Specify)		ــــــــــــــــــــــــــــــــــــــ				ertifizer sto	ruge		ii Gus Weii		
Direction from well?								ft.			
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LIT	HO. LOG (cont.) or	PLUGGIN	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	nstructed, ∐ reco	onstructed,	or □ plugged	
under my jurisdiction and Kansas Water Well Cont	u was completed on (m	io-day-yea	ar) This W	ater Wall	Reco	ns record 1	s tru	ted on (mo day w	y Knowied ear)	ge and bener.	
under the business name											
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 an	d Environment, Bureau of V	Vater, Geolo	gy Section, 1	000 SW Jac	kson S	t., Suite 420,	Tope	ka, Kansas 66612-136	7. Telephon	e 785-296-3565.	

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