

WATER WELL		WWC-5	_	0100		ion of Wate			W 11 ID			
<u> </u>		ge in Well Us	se			rces App. N		T 1: N 1	Well ID	NY 1		
1 LOCATION OF	WATER WELL:	Fraction	1/ 1	, 1/	Secti	on Numbe	r	Township Numb		ige Number		
County:		¹ / ₄ First:	1/4 1/		. D	1 4 11	1	T S	R	B B W		
2 WELL OWNER: Business:	Last Name:		or Rural Address where well is located (if unknown, distance and									
Address:	direction from nearest town or intersection): If at owner's address, check here:											
Address:												
City:	State:	ZIP:										
3 LOCATE WELL	4 DEPTH OF COM	IDI ETED	WEII.		fŧ	5 Totite	.da.			(1 : 11)		
WITH "X" IN		4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)										
SECTION BOX:	2) ft. 3) ft., or 4) \square \square											
N	WELL'S STATIC WATER LEVEL:											
	□ below land surface, measured on (mo-day-yr							unit make/model:				
NW NE						(WAAS enabled? \(\subseteq \text{ Yes} \(\subseteq \text{ No} \)						
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
W		after hours pumping gpr				Online Mapper:						
SW SE	Well water was ft. after hours pumping gpi											
	Estimated Yield:gpm				6 Elevation :ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter: in. to ft									pographic Map		
mile							Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:	5. 🗌 Public Wa	ter Supply:	well ID			10. 🔲 Oi	l Fie	ld Water Supply: 16	ease			
☐ Household						11. Test Hole: well ID						
☐ Lawn & Garden												
Livestock					,							
2. Irrigation												
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge☐ Recovery		_	Extraction	l							
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)												
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft., From ft. to ft.												
Grout Intervals: From	ft. to	ft., From .	• • • • • • • • • • • • • • • • • • • •	. ft. to	• • • • • • • • •	ft., From	• • • • •	ft. to	ft.			
Nearest source of possi ☐ Septic Tank	Die contamination: ☐ Lateral Line	·	Pit Privy		Пτ	ivestock Pe	ne	□ Insecti	cide Storage			
Sewer Lines	☐ Cess Pool		Sewage L	agoon		uel Storage			oned Water			
☐ Watertight Sewer I			Feedyard			ertilizer Sto			ll/Gas Well	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
☐ Other (Specify)												
		Dista	nce from v	vell?								
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
				% T.= 4 ·								
	Notes:											
11 CONTDACTOR	 'S OR LANDOWNER'S	CFDTIE	TC A TTO	N. Thio-	water :	wall was F	7.00	netructed Dress	netruoted	or nlugged		
under my inrisdiction	and was completed on (m	o-dav-vea	10A110. r)	14. IIIIS /	water ' and th	wen was L	_ co s tru	e to the best of m	nisu ucteu, v knowled	or □ prugged ge and belief		
Kansas Water Well C	and was completed on (nontractor's License No		. This W	ater Well	Reco	rd was con	nple	ted on (mo-day-v	ear)			
under the business nar	ne 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	i and Environment, Bureau of V	vater, Geolog	y section, I	ooo sw jac	KSON S	ı., Sulte 420,	торе	ka, Kansas 00012-130	7. reiepnone	; 100-440-3303.		