

WATER WELL RI ☐ Original Record ☐		W W C-5		1700		sion of Water			Wall ID		
1 LOCATION OF WA		e in Well U				rces App. N		Township Numb	Well ID	naa Numban	
	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb	er Ra R	nge Number □ E □ W		
County: 2 WELL OWNER: La		/4 /		r Duro	1 Addross v	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:				T					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	L Donth(a) (Proundwater Engountared: 1)										
SECTION BOX:	$\int \mathbf{N} \mathbf{D} (\mathbf{A}; \mathbf{A}) = \begin{pmatrix} \mathbf{A} & \mathbf{A} \end{pmatrix} \mathbf{A} $ ft or $\mathbf{A} \setminus \mathbf{A} \setminus \mathbf{A} \setminus \mathbf{A}$										
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	 below land surface, 	y-yr)			PS (u	ınit make/model:	e)			
NW NE	☐ above land surface,				(V	VAAS enabled?] Yes 🔲	No)			
1	Pump test data: Well water was							l Survey			
W E						□ O ₁	Online Mapper:				
SW SE						6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter:	ft. and									
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	7. Aquifer Recharge: well ID										
☐ Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?					
2. Irrigation	9. Environmental Remediation: well ID					a) Closed Loop _ Horizontal Uertical					
3. ☐ Feedlot						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
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:											
☐ 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 Bentonite Other											
Grout Intervals: From											
Nearest source of possible		,				,					
☐ Septic Tank	Lateral Line		Pit Privy			ivestock Per			cide Storag		
☐ Sewer Lines	☐ Cess Pool		Sewage L			uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		☐ F	ertilizer Sto	rage	☐ Oil We	ell/Gas Wel	l	
☐ Other (Specify)											
			ance from v							IC INTERNAL C	
10 FROM TO	LITHOLOG	JIC LUG		FRO	M	TO	LIII	HO. LOG (cont.) or	PLUGGI	GINTERVALS	
				+							
				+							
				Notes	3.						
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-ve	ar)		and th	nis record is	s tru	e to the best of m	y knowlec	lge and belief.	
Kansas Water Well Cont	tractor's License No		This W	ater Well	Reco	rd was con	nplet	ted 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.										
Legith and Department of Health at	a Lavironnicht, Dureau Or V	, aici, Ocolo	gy occuon, i	OUU D W Ja	C HOGY	, Duite 420,	rober	xa, 1xansas 00012-130	,, reichiioi	ic /05-470-3303.	

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