

WATER WELL R		W W C-5	_	1004		ion of Water			W-11 ID		
Original Record 1 LOCATION OF WA		e in Well Un Fraction	se			rces App. N		Torringhin Mumb	Well ID	n an Mumban	
	1/4 1/4 1/4 1/4 1/4			Section Number		ſ	Township Numb T S	er Rai	nge Number □ E □ W		
County:		74 7		r Diiro	1 Addross r	whon	- ~				
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:										check here.	
Address:											
City:	State:	ZIP:				T					
3 LOCATE WELL		ft	5 Latitu	de.			(decimal degrees)				
WITH "X" IN	Donth(s) (Proundryster Engountered: 1)										
SECTION BOX: 2) ft., or 4)											
IN	WELL'S STATIC WATER LEVEL:					ft. Source for Latitude/Longitude:					
	☐ below land surface, measured on (mo-day-yr							nit make/model:)	
NW NE	above land surface,					(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft. after hours pumping gpi Well water was ft.							d Survey			
W E						Online Mapper:					
SW SE											
	Estimated Yield:			pumping gpm			ion:	n:ft. 🗌 Ground Level 🗎 TOC			
S	Bore Hole Diameter: in. to										
mile											
1 mile in. to ft. Uniter											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. Dewatering: how many wells?										
Lawn & Garden						☐ Cas	sed	☐ Uncased ☐ (Geotechnic	ાો	
☐ Livestock	8. Monitoring: well ID										
2. Irrigation	9. Environmental Remediation: well ID										
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext					l	b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):					
4. Industrial	Recovery	∐ I	njection			13. ∐ Otł	ier (s	pecify):			
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 ft., Diameter ft., Diameter ft.											
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)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible		10, 1 10,11 .		. 11. 10	••••••	10., 1 10111 .					
☐ Septic Tank	Lateral Line	s \square	Pit Privy		\Box L	ivestock Per	ıs	☐ Insection	cide Storage	2	
Sewer Lines	Cess Pool		Sewage La	agoon		uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Stor	age	☐ Oil We	ll/Gas Well		
Other (Specify)											
Direction from well?			nce from w								
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LITE	HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
				NT 4							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction an	d was completed on (n	o-dav-vea	1CA 1101 r)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	water \ and th	wen was <u>L</u> is record is	j cor	isuucieu, 🔛 reco	nistructed, v knowled	or □ prugged oe and helief	
Kansas Water Well Con	tractor's License No		. This W	ater Well	Reco	rd was com	nolet	ed on (mo-day-v	ear)	ge and belief.	
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 ar	d Environment, Bureau of V	Vater, Geolog	y Section, 1	000 SW Jac	kson St	t., Suite 420, 7	Горек	a, Kansas 66612-136	7. Telephon	e 785-296-3565.	

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