

| WATER WELL RI | | W W C-5 | | 1000 | | ion of Water | | | W-11 ID | | | |
|--|--|--------------------------|------------|----------------|--|--|--------------------------------------|---------------------------|------------------------|-------------------|--|--|
| Original Record 1 LOCATION OF WA | | e in Well Us Fraction | e | | | rces App. N | | Torringhin Mumb | Well ID | n an Mumban | | |
| | 1/4 1/4 1/4 1/4 | | | Section Number | | | Township Numb T S | | Range Number R □ E □ W | | | |
| County: 2 WELL OWNER: La | • | 74 7 | | . D.1.00 | 1 Addross r | vhor | - ~ | | | | | |
| 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 | 4 DEPTH OF COM | IPLETED | WELL: | | ft | 5 Latitu | de. | | | (decimal degrees) | | |
| WITH "X" IN | WITH "A" IN Donth(s) Groundwater Engountered: 1) | | | | | 8, | | | | | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) | | | | | Dry Well Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 | | | | | | |
| 1 | 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, measured on (mo-day-yr) | | | | ••••• | | | VAAS enabled? | | N o) | | |
| | Pump test data: Well water was ft. after hours pumping gpi | | | | ☐ Land Survey ☐ Topographic Map | | | | | | | |
| W E | Well water was ft. | | | | | Online Mapper: | | | | | | |
| SW X SE | after hours | | | | | | | | | | | |
| | Estimated Yield: | | | gpm | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | | |
| S | Bore Hole Diameter: in. to ft | | | | and Source: Land Survey GPS Topographic Ma | | | | | | | |
| mile | in. to ft. | | | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | |
| 1. Domestic: | | | | | | | | | | | | |
| Household | | | | | | | | | | | | |
| ☐ Lawn & Garden ☐ Livestock | <u> </u> | | | | | | | | | | | |
| 2. Irrigation | 8. Monitoring: well ID | | | | | | | | | | | |
| 3. ☐ Feedlot | | | | | | | | | | | | |
| 4. ☐ Industrial | ☐ Recovery | | njection | | = | | | 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 | | | | | | | | | | | | |
| 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) | | | | | | | | | | | | |
| | Key Punched W | | | | | | | ft Enom | f | £. | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | | |
| Nearest source of possible | | 1, 1 10111 | | . 11. 10 | | 10., 1 10111 . | | | | | | |
| ☐ Septic Tank | ☐ Lateral Line | s 🔲 1 | Pit Privy | | \Box L | ivestock Per | ıs | ☐ Insection | cide Storage | 2 | | |
| ☐ Sewer Lines | Cess Pool | | Sewage La | | | uel Storage | | ☐ Abando | oned Water | Well | | |
| ☐ Watertight Sewer Line | | | Feedyard | | \Box F | ertilizer Stor | age | ☐ Oil We | ll/Gas Well | | | |
| ☐ Other (Specify) | | | | | | | | | | | | |
| | | | ice from v | FRO | | | | tt. HO. LOG (cont.) o | | CINTEDVALC | | |
| 10 FROM TO | LITHOLOG | JIC LUG | | FRU. | IVI | 10 | LIII | 10. LOG (cont.) of | PLUGGIN | GINTERVALS | | |
| | | | | | | | | | | | | |
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| | | | | Notes | :: | | | | | | | |
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| | | | | | | | | | | | | |
| 11 CONTRACTOR'S | OR LANDOWNER'S | S CERTIFI | CATIO | N: This v | water | well was | cor | nstructed, \square reco | onstructed, | or plugged | | |
| under my jurisdiction an | d was completed on (m | no-day-year |) | | and th | nis record is | true | e to the best of m | y knowled | ge and belief. | | |
| Kansas Water Well Cont | | | | | | | | | | | | |
| under the business name | end one copy to WATER W | ELL OWNED | and retain | one for you | ir recor | ds Fee of \$5 | 00 fo | r each constructed we | | | | |
| 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. | | | | | | | | | | | | |

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