

Original Record		W W C-5		0000		sion of Wate			Wall ID		
1 LOCATION OF WA		e in Well U Fraction	se			irces App. N		Tourship Numb	Well ID	nga Numbar	
	1/4 1/4 1/4 1/4			Section Number		r	Township Numb	er Rai	Range Number R □ E □ W		
County: 2 WELL OWNER: La		_									
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		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	Donth(s) Groundwater Engountaries 1)										
SECTION BOX:	2) ft. 3) ft., or 4) \square I					ry Well Datum: \square WGS 84 \square NAD 83 \square NAD 27					
14	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	☐ below land surface,		GPS (unit make/model:))			
NW NE	above land surface, measured on (mo-day-yr)				• • • • • • •			WAAS enabled?		V o)	
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map						
W E	after hours pumping gpn Well water was ft.					☐ Online Mapper:					
SW SE	after hours pumping										
	Estimated Yield:gpm					6 Eleva	6 Elevation :ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to ft.				Source: Land Survey GPS Topographic Map						
mile	in. to 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.					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery		Injection	Extraction	1						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:											
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											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		. It., From		. It. to		It., From		It. to	It.		
Septic Tank	Lateral Line	. П	Pit Privy		Пι	ivestock Pe	ne	□ Insecti	cide Storage	2	
Sewer Lines	☐ Cess Pool		Sewage L	agoon		Fuel Storage			oned Water		
☐ Watertight Sewer Line						ertilizer Sto			ell/Gas Well		
Other (Specify)											
Direction from well?			nce from v								
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LIT	HO. LOG (cont.) or	: PLUGGIN	G INTERVALS	
				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	r)	14. IIIIS	water and th	wen was L his record i	_ co s tm	nsuucieu, 🔝 IeCC ie to the best of m	v knowled	or prugged ge and helief	
Kansas Water Well Cont	ractor's License No		This W	ater Well	l Reco	ord was con	nple	ted on (mo-day-v	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.											
KS Department of Health ar	a Environment, Bureau of V	vater, Geolog	gy Section, 1	UUU SW Ja	ekson S	t., Suite 420,	1 ope	ka, Kansas 66612-136)/. relephon	e /85-296-3565.	

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