

Original Record		W W C-5		3130		ion of Water	I		/all ID			
		e in Well U	se	1		rces App. No			ell ID	aa Numbaa		
1 LOCATION OF WATER WELL: County:		Fraction		4 1/4	Section Number		Township Nu	mber S	Range Number R			
2 WELL OWNER: La		74 7		r Duro	1 Addraga v	=						
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:										леск пете.		
Address:												
City:	State:	ZIP:										
3 LOCATE WELL	4 DEPTH OF COM		ft	5 Latitu	do.			(decimal degrees)				
WITH "X" IN	Donth(s) Groundwater Engeuntered: 1)					8,						
SECTION BOX:	ECHON BOX: (2) ft (3) ft or (4)											
N	WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:							
	 below land surface, 	-yr)		□GF	S (unit make/model	<u></u> . :)				
NW NE	above land surface, measured on (mo-day-yr)							(WAAS enabled? ☐ Yes ☐ No)				
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
WE	after hours pumping gp Well water was ft.					Online Mapper:						
S X SE												
	Estimated Yield:		mpinggpm			6 Elevation :ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter: in. to f											
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												
☐ Livestock	8. Monitoring: well ID											
2. Irrigation	9. Environmental Remediation: well ID					a) Closed Loop						
3. ☐ Feedlot						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):						
4. Industrial	Recovery	□ .	Injection			13. □ Oth	er (specify):	•••••				
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 in. to 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. to ft.												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible		10., 1 10111		11. 10		10., 1 10111 .						
Septic Tank	Lateral Line	s \square	Pit Privy			ivestock Pen	ıs 🔲 Inse	cticide	Storage			
Sewer Lines	Cess Pool		Sewage La	agoon		uel Storage			Water V	Well		
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Stor	age 🗌 Oil	Well/Ga	as Well			
Other (Specify)												
Direction from well?			ince from w									
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO 1	LITHO. LOG (cont.	or PLU	JGGING	3 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-day yee	r)	N: 1 ms V	vater v and th	wen was <u></u>	j constructed, Ll f	my br	ucted, (or □ prugged		
Kansas Water Well Cont	tractor's License No		This W	ater Well	Reco	rd was com	ipleted on (mo-day	-vear)	wicus	,c and ocher.		
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	gy Section, 1	000 SW Jac	kson St	t., Suite 420, T	Topeka, Kansas 66612-	1367. T	elephone	785-296-3565.		

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