

WATER WELL RI		W W C-5		0400		ion of Water			Wall ID		
Original Record 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 Ka R	nge Number □ E □ W		
County: 2 WELL OWNER: La		74 7		r Direc	1 Addragg	who	_ ~				
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:				1					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)					ft. 5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) \square I				Dongitude:						
IN .	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	 below land surface, 			GI	PS (t	ınit make/model:)			
NWN X	above land surface,					VAAS enabled?		No)			
	Pump test data: Well water was							l Survey			
W E						☐ Oı	☐ Online Mapper:				
SW SE						6 Elevation:ft. Ground Level TOC					
S	Bore Hole Diameter:	ft. and		Source: Land Survey GPS Topographic Map							
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:	Public Wa					10. 🔲 Oil	l Fiel	d 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	. г] Pit Privy		Пι	ivestock Per	ne	□ Insecti	cide Storag	ρ	
Sewer Lines	☐ Cess Pool		Sewage L	agoon		uel Storage			oned Water		
☐ Watertight Sewer Line						ertilizer Sto			ll/Gas Wel		
☐ Other (Specify)											
Direction from well?			ance from v								
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LITI	HO. LOG (cont.) or	PLUGGIN	NG 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-ve	r ICA HO ar)	14. 11118	and th	wen was L	_ CO	nsuluciou, 🔝 Tecc e to the best of m	v knowlea	, or □ prugged loe and helief	
Kansas Water Well Cont	ractor's License No		This W	ater Well	Reco	rd was con	nplet	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, Geolo	gy section, l	UUU SW Jac	ckson S	t., Suite 420, '	ı opel	ka, Kansas 66612-136	7. Telephor	ie /85-296-3565.	

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