

WATER WELL RI				1240		ion of Water			Wall ID			
Original Record    1 LOCATION OF WA		e in Well l				rces App. N		Township Numb	Well ID			
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb	er   Ka   R	nge Number □ E □ W			
2 WELL OWNER: La		/4 /		r Duro	1 Addross v	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	Donth(s) Croundwater Engountered: 1)											
SECTION BOX:	2) ft. 3) ft., or 4) $\square$ I				ry Well Datum: $\square$ WGS 84 $\square$ NAD 83 $\square$ NAD 27							
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface,			□GI	PS (t	ınit make/model:	· • • • • • • • • • • • • • • • • • • •	)				
NW   NE	above land surface, measured on (mo-day-yr)							VAAS enabled?		No)		
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map							
W X E	afterhours pumpinggp: Well water wasft.					☐ Online Mapper:						
SW   SE	after hours pumping gp											
	Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC						
S	Bore Hole Diameter: in. to ft				d Source: Land Survey GPS Topographic Map							
mile	in. to ft.								• • • • • • • • • • • • • • • • • • • •			
7 WELL WATER TO BE USED AS:												
1. Domestic:	5. Public Wa							d Water Supply: 16				
Household	6. Dewatering: how many wells?											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID											
2. Irrigation	8. Monitoring: well ID											
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extr					b) Open Loop  Surface Discharge  Inj. of Water						
4. ☐ Industrial	☐ Recovery		Injection					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												
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
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		,				,						
☐ Septic Tank	Lateral Line		☐ Pit Privy			ivestock Per			cide Storag			
Sewer Lines	Cess Pool		Sewage L			uel Storage			oned Water			
☐ Watertight Sewer Line			_ Feedyard		☐ F	ertilizer Sto	rage	☐ Oil We	ll/Gas Wel	1		
☐ Other (Specify)												
10 FROM TO	LITHOLOG			FRO				HO. LOG (cont.) 01		JG INTERVALS		
TO TROM	EITHOLOG	JIC LOG		TRO	171	10	LIII	.10. LOG (cont.) of	LUGGII	10 INTERVILES		
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTI	FICATIO	N: This	water	well was	co	nstructed, reco	onstructed	, or plugged		
under my jurisdiction and	d was completed on (m	io-day-ye	ar)	Votor W1-11	and th	us record is	s tru	e to the best of m	y knowled	ige and belief.		
Kansas Water Well Cont												
under the business name of												
		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