

WATER WELL RI ☐ Original Record ☐		W W C-5		0410		ion of Wate			Wall ID		
1 LOCATION OF WA		e in Well U				rces App. N		Township Numb	Well ID	aga Numbar	
	Fraction 1/4 1/4 1/4 1/4			Section Number		Г	Township Numb	er Rai	Range Number R □ E □ W		
County: 2 WELL OWNER: Las		74 7		. D.1200	1 Addross	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:									
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	Donth(s) Groundwater Engagement (1)					8,					
SECTION BOX:	2) ft., or 4)					Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27					
14	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
],	below land surface,		GPS (unit make/model:)			
X - NW NE	Dabove land surface, measured on (mo-day-yr). Pump test data: Well water was				• • • • • • • • • • • • • • • • • • • •			WAAS enabled?		√ o)	
								d Survey			
W E							☐ Online Mapper:				
SW SE	after hours			6 Elevation:ft. Ground Level TOC							
	Estimated Yield:								gp		
S	Bore Hole Diameter: in. to ft				Source: Land Survey GPS Topographic Ma						
mile	in. to ft.						☐ Other				
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. 🔲 Public Wa							ld Water Supply: 16			
Household	6. Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID										
☐ Livestock 2. ☐ Irrigation	8. Monitoring: well ID										
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	Entraction	•			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											
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											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Nearest source of possible		. It., FIOIII	••••••	. 11. 10		It., FIOIII		11. 10	11.		
Septic Tank	Lateral Line	s Г] Pit Privy		ПΙ	ivestock Per	ns	☐ Insection	cide Storage	2	
☐ Sewer Lines	Cess Pool		Sewage L	agoon		uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		\Box F	ertilizer Sto	rage	☐ Oil We	ll/Gas Well		
☐ Other (Specify)											
Direction from well?			ance from v								
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
					-						
					-						
					-						
				Notes	,.						
110165.											
11 CONTRACTOR'S	OR LANDOWNER'S	CERTI	FICATIO	N: This	water	well was [l co	nstructed. \square reco	onstructed	or nlugged	
under my jurisdiction and	d was completed on (m	no-day-ye	ar)		and th	nis record i	s tru	e to the best of m	y knowled	ge and belief.	
Kansas Water Well Cont	ractor's License No		This W	ater Well	Reco	rd was con	nplet	ted on (mo-day-y	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 <u>constructed</u> 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