

WATER	WELL R Record			WWC-5		4114		sion of Wate			X 7-11 H		
	ge in Well Use	Fraction			Resources App. N Section Numbe		Township Numbe	Well ID er Range Number					
1 LOCATION OF WATER WELL: County:Fraction1/41/4							$\begin{array}{c c} & & & \\ \hline \\ \hline$						
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance a													
Business: direction from nearest town or intersection): If at owner's address, check											s, check here: 🗌		
Address: Address:													
City: State: ZIP:													
3 LOCATE WELL WITH (XY) DI 4 DEPTH OF COMPLETED WELL							ft. 5 Latitude :(decimal degrees)						
WITH "X SECTION		Depth(s) Groundwater Encountered: 1)											
N		2) ft. 3) ft., or 4) 🗆 Dr					ell	Datum: WGS 84 NAD 83 NAD 27 <u>Source for Latitude/Longitude</u> : GPS (unit make/model:)					
	K	WELL'S STATIC WATER LEVEL:											
NW	NE	above land surface, measured on (mo-day-yr)											
		Pump test data: Well water was ft.						□ Land Survey □ Topographic Map □ Online Mapper:					
w	E	after hours pumping											
SW	SE	Well water was ft. after hours pumping gpm											
		Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC					
S		Bore Hole Diameter: in. to ft.						Source: Land Survey GPS Topographic Ma					
1 m		DE LICED	in. to ft. BE USED AS:										
1. Domestic:	VALEKIC			ter Supply: y	vell ID			10 🗆 Oi	il Fie	ld Water Supply: lea	ise		
Househ	old	 5. Dewater Supply: well ID 6. Dewatering: how many wells? 								e: well ID			
Lawn &		7. 🗌 Aquifer Recharge: well ID					Cased 🗌 Uncased 🔲 Geotechnica						
	Livestock 8. Monitoring: well ID									al: how many bores? Loop 🔲 Horizonta			
3. ☐ Feedlot	2. □ Irrigation 9. Environmental Remediation: well ID 3. □ Feedlot □ Air Sparge □ Soil Vapor Ex									Loop \Box Surface Dis			
4. Industrial Recovery Injection								13. Other (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 JOINTS: Glued Clamped Welded Threaded													
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.													
Casing height above land surface													
☐ Steel													
Brass													
SCREEN O		ATION OPE		RE: auze Wrappe	а Пт	orah Cut		illad Holos		Other (Specify)			
		☐ Key Punc						ne (Open H		Other (Specify)	•••••		
										ft., From	ft.	to ft.	
										ft., From			
		It. to l e contaminat i		ft., From	•••••	ft. to		ft., From	•••••	ft. to	ft.		
Septic T			Lateral Line	es 🗆 H	Pit Privy			livestock Pe	ens	Insectici	de Stora	ge	
Sewer L			Cess Pool		Sewage La			Fuel Storage		Abandon Abandon			
U Watertig	□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well												
Direction from well? ft.													
10 FROM	TO		ITHOLO			FRC		TO		HO. LOG (cont.) or	PLUGG	ING INTERVALS	
							$ \rightarrow $						
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++						+	\rightarrow						
Notes:													
				CEDTIE	CATIO	N. This		····all·· - 「	-	materia da 🗖 🚥 🗤	a ctumt ·	d on 🗆 n ¹ 1	
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.													
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)													
under the business name of													
KS Departm	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.												
-		eks.gov/waterwe						, 				KSA 82a-1212	