

WATER WELL RI		WWC-5	1000			ion of Water		Wall ID			
		e in Well Use				rces App. No		Well ID	aa Numbaa		
1 LOCATION OF WATER WELL: County:		Fraction			Section Number		Township Number	ber Ran R	ige Number □ E □ W		
- v		4 74		Duro	1 Addross u						
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:				I					
3 LOCATE WELL	4 DEPTH OF COM	IPLETED V	ELL:		ft	5 Latitud	de.		(decimal degrees)		
WITH "X" IN	Donth(s) Groundwater Encountered: 1)										
SECTION BOX:	2) ft. 3) ft., or 4)					Dry Well Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27					
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr)				(						
NW   NE	above land surface, measured on (mo-day-yr)				(						
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map						
E E	afterhours pumpinggpi Well water wasft.					☐ Online Mapper:					
SW   SE	after hours pumping				m						
	Estimated Yield:g						6 Elevation:ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to f				nd Source: Land Survey GPS Topographic Map						
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. Public Wa						Field Water Supply:				
Household	6. Dewatering: how many wells?										
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID										
2. Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot	9. Environmental Remediation: wen ib  ☐ Air Sparge ☐ Soil Vapor Exti				••••	b) Open Loop Surface Discharge Inj. of Water					
4. ☐ Industrial	☐ Recovery		_				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											
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		10., 1 10111	• • • • • • • • • • • • • • • • • • • •	11. 10		10., 1 10111					
☐ Septic Tank	☐ Lateral Line	s 🔲 Pi	t Privy		☐ Li	ivestock Pen	s 🔲 Insect	icide Storage			
☐ Sewer Lines	Cess Pool		wage La			uel Storage		loned Water	Well		
☐ Watertight Sewer Line		☐ Fe	edyard		☐ Fe	ertilizer Stora	age 🗌 Oil W	ell/Gas Well			
☐ Other (Specify)											
			e from w	FROM			1 LITHO. LOG (cont.) o		CINTEDVALC		
10 FROM TO	LITHOLOG	JIC LUG		FRON	1	10 1	LITHO. LOG (cont.) c	r PLUGGIN	JINTERVALS		
				Notes:							
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFIC	CATION	This w	ater v	well was 🔲	constructed, $\square$ rec	onstructed,	or  plugged		
under my jurisdiction an	d was completed on (m	no-day-year)		a	and th	is record is	true to the best of n	ny knowled:	ge and belief.		
Kansas Water Well Cont											
under the business name	end one copy to WATER W	FII OWNED	nd retain	one for your	record	ls Fee of \$5 (	O for each constructed w				
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.											

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