

WATER WELL RI		W W C-5		17-7-1		ion of Water			W-11 ID		
		e in Well U	se	T		rces App. No		Cournabin Mumb	Well ID	a Numban	
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4 1/4		4 1/4	Section Number		· 1	Γownship Numb T S		Range Number R □ E □ W	
- v		74 7		r Duro	1 Addraga v	vhoro	where well is located (if unknown, distance and				
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	de.			(decimal degrees)				
WITH "A" IN Donth(s) Groundwater Engountered: 1)					8,						
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)					□GP	S (un	it make/model:	• • • • • • • • • • • • • • • • • • • •)	
NW NE	above land surface, measured on (mo-day-yr)				•••••			AAS enabled?		1 0)	
	Pump test data: Well water was ft. after hours pumping gpi				☐ Land Survey ☐ Topographic Map						
E E	Well water was ft.					Online Mapper:					
SW SE	SW SE after hours pumpin					6 Elevation:ft. Ground Level TOC					
	gpm	gpm									
S	Bore Hole Diameter: in. to f				and Source: Land Survey GPS Topographic Ma						
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. Public Water Supply: well ID										
Household	6. Dewatering: how many wells?										
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID										
2. Irrigation	8. Monitoring: well ID										
3. ☐ Feedlot											
4. ☐ Industrial	☐ Recovery		Injection					pecify):			
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											
Grout Intervals: From											
Nearest source of possible		10., 1 10111 .		. 11. 10		10., 1 10111 .					
☐ Septic Tank	□ Lateral Line	s \square	Pit Privy			ivestock Pen	ıs	☐ Insection	cide Storage	;	
☐ Sewer Lines	☐ Cess Pool		Sewage La			uel Storage			oned Water		
☐ Watertight Sewer Line			Feedyard		□ F	ertilizer Stor	age	☐ Oil We	ll/Gas Well		
								C.			
Direction from well? 10 FROM TO	LITHOLOG		ince from w	FRO				π. Ο. LOG (cont.) οι		CINTEDVALS	
10 FROM TO	LITHOLOG	JIC LUG		FRO	IVI	10	LHT	O. LOG (cont.) of	PLUGGIN	GINTERVALS	
				Notes	:						
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIF	TICATIO	N: This v	vater v	well was	cons	structed, 🗌 reco	onstructed,	or plugged	
under my jurisdiction an	d was completed on (m	no-day-yea	r)		and th	is record is	true	to the best of m	y knowled	ge and belief.	
Kansas Water Well Cont											
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.										

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