

WATER WELL R  ☐ Original Record ☐		W W C-5	1102			ion of Water	I		Well ID			
		e in Well Use Fraction				rces App. No on Number		Numb		ga Numbar		
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4		1/4	secu	on Number	per Township Num T S		er Ran	ge Number □ E □ W		
2 WELL OWNER: La	First:			Durol	Il Address where well is located (if unknown, distance and							
Business:												
Address:	direction from nearest town or intersection): If at owner's address, check here:											
Address:												
City:	State:	ZIP:				1						
3 LOCATE WELL	4 DEPTH OF COM	IPLETED WE	ELL:		ft	5 Latitud	de.			(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					t. 5 Latitude:						
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 1				Dry Well Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:							
11	WELL'S STATIC WATER LEVEL:											
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)						
NW NE	above land surface, measured on (mo-day-yr				☐ Land Survey ☐ Topographic Map					lo)		
	Pump test data: Well water was ft.											
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:						
SW   SE	after hours pumping gp											
X	Estimated Yield:		5P		6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic							
mile	in. to ft.					☐ Other						
7 WELL WATER TO BE USED AS:												
1. Domestic:		ter Supply: well										
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: well ID  ☐ Air Sparge ☐ Soil Vapor Ext.				••••	a) Closed Loop ☐ Horizontal ☐ Vertical 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? $\square$ Yes $\square$ No												
8 TYPE OF CASING USED:  Steel PVC Other												
Casing diameter in. to												
Casing height above land surface in. Weight												
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												
SCREEN-PERFORATED INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		,				,						
☐ Septic Tank	□ Lateral Line				☐ Li	ivestock Pen	s $\square$	Insection	cide Storage			
☐ Sewer Lines	☐ Cess Pool	☐ Sew				uel Storage		-	oned Water	Well		
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age $\Box$	Oil We	ll/Gas Well			
☐ Other (Specify)												
10 FROM TO	LITHOLOG		rom we	FROM						G INTERVALS		
TO TROW TO	LITHOLOG	JIC LOG		TRON	1	10 1	LITTIO. LOG (	20111.) 01	LUGGIN	JINTERVALS		
				Notes:	I							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was $\square$ constructed, $\square$ reconstructed, or $\square$ plugged												
under my jurisdiction an	d was completed on (m	no-day-year)		a	nd th	is record is	true to the be	st of m	y knowled	ge and belief.		
Kansas Water Well Con	tractor's License No	Ti	his Wa	ter Well	Recor	rd was com	pleted on (mo	ı-day-ye	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 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.										