

WATER WELL RI		W W C-5		0000		sion of Water			W-11 ID			
Original Record 1 LOCATION OF WA		e in Well I				irces App. N		Township Numb	Well ID	nga Numban		
	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W			
County:		/4		r Duro	1 Addragg 1	whor	_ ~					
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 "X" IN	Donth(s) Groundwater Engeuntered: 1)											
SECTION BOX:	2) ft. 3) ft., or 4) \square I				Dongleade:							
14	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	☐ below land surface,			GI	PS (u	nit make/model:)				
NW NE	above land surface, measured on (mo-day-yr)							VAAS enabled?		No)		
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
W E	afterhours pumpinggpi Well water wasft.					Online Mapper:						
SW SE X -	after hours pumping											
	Estimated Yield:	••••••	БРШ		6 Elevation:ft. ☐ Ground Level ☐ TOC							
S	Bore Hole Diameter:	ft. and		Source: Land Survey GPS Topographic Map								
mile	in. to ft.						☐ Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:	Public Wa							d Water Supply: 16				
Household	6. Dewatering: how many wells?											
Lawn & Garden	<u> </u>											
Livestock	8. Monitoring: well ID											
2. ☐ Irrigation 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	LAHACHOI	1							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter												
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., From		It. to		It., From .	• • • • •	It. to	It.			
Septic Tank	Lateral Line	е Г	☐ Pit Privy		Пι	ivestock Per	16	□ Insecti	cide Storag	a		
Sewer Lines	☐ Cess Pool		Sewage L	agoon		Fuel Storage			oned Water			
☐ Watertight Sewer Line						ertilizer Sto		· · · · · · · · · · · · · · · · · · ·	ll/Gas Wel			
Other (Specify)												
Direction from well?												
10 FROM TO	LITHOLOG	GIC LOG		FRO	M	TO	LITH	HO. LOG (cont.) or	PLUGGIN	IG INTERVALS		
				N7 4								
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged												
under my jurisdiction an	d was completed on (n	o-dav-ve	r ICA I IO ar)	1111S	water and th	wen was L	_ COl s tru	e to the hest of m	v knowlec	lge and helief		
Kansas Water Well Cont	ractor's License No		This W	ater Well	l Reco	ord was con	nplet	ed on (mo-day-v	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.												
KS Department of Health ar	a Environment, Bureau of V	vater, Geolo	gy Section,	luuu SW Ja	ekson S	t., Suite 420, '	ı opek	ka, Kansas 66612-136	7. Telephor	.e /85-296-3565.		

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