

WATER WELL RI		W W C-5	1201	_		ion of Wate			W 11 ID		
<u> </u>		ge in Well Use				rces App. N		T 1 NI 1.	Well ID	N1	
1 LOCATION OF WATER WELL:		Fraction 1/4 1/4 1/4		1/4	Section Numb		er	Township Numb	l l	nge Number	
County: 2 WELL OWNER: Last Name:				-	Dumo	1 A d duaga	ba		R	E W	
Business:	st Name:	First:	First: Street or Rural Address where well is located (if unkn direction from nearest town or intersection): If at owner's address								
Address:				unection i	IOIII IICa	arest town of	i iiitei	section). If at Owner	s address,	check here.	
Address:											
City:	State:	ZIP:									
3 LOCATE WELL	PLETED WELL: ft.			ft.	5 Latitude:(decimal degrees)						
WITH "X" IN	WITH 'A' IN Denth(s) Groundwater Engountered: 1)										
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:					
	, measured on (GPS (unit make/model:)						
NW NE	, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)						
	Pump test data: Well w				☐ Land Survey ☐ Topographic Map						
W E			ımping gpm er was ft.			Online Mapper:					
SW SE - X	pumping gpm				6 Elevation:ft. Ground Level TOC						
		gpm									
S	in. to ft. and				Source: Land Survey GPS Topographic Map						
mile											
7 WELL WATER TO BE USED AS:											
1. Domestic:	5. Public Wa							ld Water Supply: le			
Household	6. Dewatering: how many wells?					11. Test Hole: well ID					
☐ Lawn & Garden☐ Livestock						☐ Cased ☐ Uncased ☐ Geotechnical					
2. Irrigation	8. Monitoring: well ID					12. Geothermal: how many bores?					
3. ☐ Feedlot	9. Environmental Remediation: well 1D					b) Open Loop Surface Discharge Inj. of Water					
4. ☐ Industrial	ction			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 ft., Diameter ft., Diameter ft.											
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										ft	
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible		,				,					
☐ Septic Tank	☐ Lateral Line					ivestock Pe			cide Storage		
☐ Sewer Lines	Cess Pool		wage Lag	goon		uel Storage			oned Water		
☐ Watertight Sewer Lin		☐ Fee	edyard		∐ Fe	ertilizer Sto	orage	∐ Oil We	ll/Gas Well		
☐ Other (Specify)											
10 FROM TO	LITHOLOG		from we	FRON		ТО		It. HO. LOG (cont.) or		CINTEDVALS	
TO PROME TO	LITHOLOG	SIC LOG		TROP	VI	10	LII	110. LOG (cont.) of	LUGGIN	UNITERVALS	
										-	
				Notes	:	ı					
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFIC.	ATION	: This w	vater v	well was	co	onstructed, \square reco	nstructed,	or plugged	
under my jurisdiction an Kansas Water Well Con	d was completed on (n	no-day-year) .			and th	is record i	is tru	e to the best of m	y knowled	ge and belief.	
Kansas Water Well Cont	tractor's License No	Т	this Wa	ter Well	Reco	rd was coi	mple	ted on (mo-day-ye	ear)		
under the business name	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.										