

WATER WELL R  ☐ Original Record ☐		W W C-5	1000.			on of Water			Well ID		
1 LOCATION OF W.		e in Well Use Fraction				rces App. No		uunahin Numb		nga Numbar	
County:	1/4 1/4 1/4 1/4 1/2			Section Number		10	Township Number T S		Range Number R □ E □ W		
2 WELL OWNER: La	First:			Durol	al Address where well is located (if unknown, distance and						
Business:											
Business: direction from nearest town or intersection): If at owner's address, check here:											
Address:											
City:	State:	ZIP:				Т					
3 LOCATE WELL	4 DEPTH OF COM	IPLETED WE	LL:		ft	5 Latitu	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				. ft.   5 Latitude:						
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I				Dry Well Datum: \(\sigma\) WGS 84 \(\sigma\) NAD 83 \(\sigma\) NAD 27						
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	□ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr) Pump test data: Well water was					☐ GPS (unit make/model:)  (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
NW NE											
W E	after hours pumping gp: Well water was ft.					Online Mapper:					
SW SE	after hours pumping gpr Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC					
S	Bore Hole Diameter: in. to f				and Source: Land Survey GPS Topograph						
mile	in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic:		ter Supply: well				10. 🔲 Oil	Field V	Vater Supply: 16	ease		
☐ Household	6. ☐ Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID										
Livestock	8. Monitoring: well ID							how many bores			
2. ☐ Irrigation 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	atraction		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 diameter											
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		II., From	I	τ. το		π., From .		п. то	It.		
Septic Tank	□ Lateral Line	s 🔲 Pit P	rivv		□ I i	vestock Pen	s	□ Insectio	cide Storage	a	
Sewer Lines	☐ Cess Pool	☐ Sewa				uel Storage	.5		oned Water		
☐ Watertight Sewer Lin						ertilizer Stor	age		ll/Gas Wel		
Other (Specify)											
Direction from well?			rom we								
10 FROM TO	LITHOLOG	GIC LOG		FROM	1	TO 1	LITHO.	LOG (cont.) or	PLUGGIN	IG INTERVALS	
				Notone							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Contractor's License No											
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 a	na Environment, Bureau of W	vater, Geology Sec	tion, 100	JU SW Jack	son St	., Suite 420, T	opeka, l	Kansas 66612-136	)/. Telephor	e /85-296-3565.	