

Original Record		W W C-5		0100		sion of Water			Wall ID			
1 LOCATION OF WA		e in Well I				rces App. N		Township Numb	Well ID	naa Numban		
County:	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb	er   Ka   R	nge Number □ E □ W			
2 WELL OWNER: La		/4 /		. D.1100	1 Addraga	who	_ ~					
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:				1						
3 LOCATE WELL	4 DEPTH OF COM	IPLETE	D WELL:		ft	5 Latitu	ıde.			(decimal degrees)		
WITH "X" IN	WITH "A" IN Donth(s) Groundwater Engountered: 1)											
SECTION BOX:	SECTION BOX: 2) ft. 3) ft., or 4) $\square$					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)					□GI	PS (t	ınit make/model:		)		
NW   NE	above land surface, measured on (mo-day-yr)				☐ Land Survey ☐ Topographic Map					No)		
	Pump test data: Well water was ft.											
E E	afterhours pumpinggpi Well water wasft.					☐ Online Mapper:						
SW   SE	afterhours pumping				n							
	Estimated Yield:			gpm				n:ft. Ground Level TOC				
S	Bore Hole Diameter: in. to ft				d Source: Land Survey GPS Topographic Map							
mile	111111111111111111111111111111111111111							Other	•••••			
7 WELL WATER TO BE USED AS:												
1. Domestic:	5. Public Wa							d Water Supply: 16				
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. Wen ib  ☐ Air Sparge ☐ Soil Vapor Extra											
4. ☐ Industrial	☐ Recovery		Injection		=			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												
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)												
								ft From	ft t	o ft		
SCREEN-PERFORATED INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		. 10., 1 10111	• • • • • • • • • • • • • • • • • • • •	. 11. 10		10., 1 10111 .						
☐ Septic Tank	☐ Lateral Line	s [	Pit Privy		$\Box$ L	ivestock Per	ns	☐ Insection	cide Storag	e		
☐ Sewer Lines	Cess Pool		🛘 Sewage L			uel Storage			oned Water			
☐ Watertight Sewer Line			☐ Feedyard		☐ F	ertilizer Sto	rage	☐ Oil We	ll/Gas Wel	l		
Other (Specify)								C.				
Direction from well?  10 FROM TO	LITHOLOG			FRO				tt. HO. LOG (cont.) o		JC INTEDWALS		
10 FROM TO	LITHOLOG	alc LUG		FRU	IVI	10	LIII	no. Log (cont.) of	PLUGGII	NG INTERVALS		
				Notes	:: ::							
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTI	FICATIO	N: This	water	well was	co	nstructed, 🗌 reco	onstructed	, or plugged		
under my jurisdiction an	d was completed on (m	no-day-ye	ar)		and th	nis record is	s tru	e to the best of m	y knowled	lge and belief.		
Kansas Water Well Cont												
under the business name	end one copy to WATER W	ELL OWN	ER and retain	one for you	ir recor	ds Fee of \$5	00 fc	or each constructed wa				
	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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