

WATER WELL RI		WWC-5	_	1002		ion of Water			Wall ID			
		e in Well Use				rces App. No		Foremakin Numb	Well ID	a Numban		
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4 1/4		4 1/4	Section Number		. 1	Γownship Numb T S		Range Number R □ E □ W		
- v		74 7		r Diiro	1 Addross v	vhoro						
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:										check here.		
Address:												
City:	State:	ZIP:				T						
3 LOCATE WELL		ft	5 Latitu	de.			(decimal degrees)					
WITH "X" IN	WITH "A" IN Donth(s) Groundwater Engountered: 1)											
SECTION BOX:	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:						
	. I also with the surface, measured on (mo and) ju					□GF	S (un	nit make/model:	• • • • • • • • • • • • • • • • • • • •)		
NW NE	above land surface, measured on (mo-day-yr)				•••••			AAS enabled?		1 0)		
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map							
E E	after hours pumping gp Well water was ft.					☐ Online Mapper:						
SW SE	SW SE after hours pumping					6 Elevation:ft. Ground Level TOC						
	gpm	gpm										
S	Bore Hole Diameter: in. to f				and Source: Land Survey GPS Topographic Ma							
mile			☐ Other									
7 WELL WATER TO BE USED AS:												
1. Domestic:												
Household	6. ☐ Dewatering: how many wells?											
☐ Lawn & Garden ☐ Livestock	<u> </u>											
2. Irrigation	8. Monitoring: well ID											
3. ☐ Feedlot												
4. ☐ Industrial	☐ Recovery		ection		-			pecify):				
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 in. to												
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												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		10., 1 10111		. 11. 10	•••••	10., 1 10111 .		11. 10	10.			
☐ Septic Tank	Lateral Line	es 🔲 P	it Privy		\Box L	ivestock Pen	ıs	☐ Insection	cide Storage	;		
☐ Sewer Lines	☐ Cess Pool	\square S	ewage La		\Box F	uel Storage			oned Water			
☐ Watertight Sewer Line		☐ F	eedyard		\Box F	ertilizer Stor	age	☐ Oil We	ll/Gas Well			
☐ Other (Specify)												
			e from w							CINTEDIALC		
10 FROM TO	LITHOLOG	JIC LUG		FRO	IVI	TO	LIIH	O. LOG (cont.) or	PLUGGIN	GINTERVALS		
				Notes	 ::							
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFIC	CATIO	N: This v	water	well was	con	structed, 🔲 reco	onstructed,	or plugged		
under my jurisdiction an	d was completed on (m	no-day-year)			and th	nis record is	true	to the best of m	y knowled	ge and belief.		
Kansas Water Well Cont												
under the business name	end one copy to WATER W	ELL OWNED	and retain	one for you	r recor	ds Fee of \$5	00 for	each constructed wa				
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.												

KSA 82a-1212