

WATER WELL R		WWC-5 ¹²⁶⁴	D	ivision of Wate				
				ources App. No.		Well ID		
1 LOCATION OF WATER WELL: County:		Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$			$\begin{array}{c c} \text{on Number} & \text{Township Number} & \text{Range Number} \\ T & S & R & \square E \square W \end{array}$			
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
					nearest town or intersection): If at owner's address, check here:			
Address:	Address:							
Address:	G () , ,	700						
City: State: ZIP:								
WITH "X" IN 4 DEPTH OF COMPLETED WELL:								
SECTION BOX:		Encountered: 1)			Longitude:(decimal degrees)			
Ν	2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL:				Datum: 🗌 WGS 84 🔲 NAD 83 🗌 NAD 27			
	X □ below land surface, measured on (mo-day-yr				Source for Latitude/Longitude:			
NW NE					(WAAS enabled? Yes No)			
	Pump test data: Well water was ft.				□ Land Survey □ Topographic Map			
W E	after hour			Online Mapper:				
SW SE	Well water was ft.							
	after hours pumping gpr Estimated Yield:gpm			6 Eleva	6 Elevation:ft. Ground Level TOC			
S	Bore Hole Diameter: in. to				Source: Land Survey GPS Topographic Map			
1 mile	in. to f				Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:5. 								
Household	6. Dewatering: how many wells?				11. Test Hole: well ID			
Lawn & Garden		echarge: well ID			\Box Cased \Box Uncased \Box Geotechnical			
☐ Livestock 2. ☐ Irrigation		ag: well IDal Remediation: well II			a) Closed Loop			
3. Feedlot	Air Sparg				b) Open Loop 🗌 Surface Discharge 🗌 Inj. of Water			
4. Industrial Recovery Injection 13. Other (specify):								
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:								
Water well disinfected? \Box Yes \Box No								
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded								
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.								
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
Steel Stainless Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole)								
□ 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. to ft., From ft. to ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage								
Separ Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well								
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well								
Chter (Specify)								
Direction from well? Distance from well? 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS								
10 FROM TO	LITHOLO	GIC LOG	FROM	ТО	LITHO. LOG (cont.) or	PLUGGING INTERVALS		
			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	e of							
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. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212								