

WATER WELL RI  ☐ Original Record ☐		W W C-5		0120		sion of Wate			Wall ID		
1 LOCATION OF WA		e in Well U				irces App. N		Torreshin Numb	Well ID		
	Fraction 1/4 1/4 1/4 1/4			Section Number		Г	Township Numb	er   Ra	nnge Number □ E □ W		
County:		74 7		r Duro	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:									
3 LOCATE WELL	4 DEPTH OF COM		ft	5 Latitu	ıde.			(decimal degrees)			
WITH "X" IN	WITH "A" IN Donth(s) Groundwater Engagement (1)					8					
SECTION BOX:	2) ft. 3) ft., or 4) $\square$ I				Dongtoute:(decimal degrees)						
14	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	☐ below land surface,			G	PS (ı	ınit make/model:		)			
NW   NE	above land surface, measured on (mo-day-yr)							WAAS enabled?			
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
E E	after hours pumping gpn Well water was ft.					☐ Online Mapper:					
SW SE	after hours pumping gpi										
	Estimated Yield:gpm				<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter:	ft. and		Source: Land Survey GPS Topographic Map							
mile	in. to ft.							Other			
7 WELL WATER TO BE USED AS:											
1. Domestic:	<ol><li>Public Wa</li></ol>							ld Water Supply: 16			
Household	6. Dewatering: how many wells?										
Lawn & Garden	7. Aquifer Recharge: well ID										
Livestock	8. Monitoring: well ID										
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID  ☐ Air Sparge ☐ Soil Vapor Extr					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery		Injection	Extraction	1						
Was a chemical/bacteriological sample submitted to KDHE?  Yes  No If yes, date sample was submitted:											
Water well disinfected?											
8 TYPE OF CASING USED:  Steel PVC Other											
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 ft. to ft., From ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
		. ft., From		. ft. to		ft., From .	• • • • •	ft. to	ft.		
Nearest source of possible			Die Dairer		Πт	iveate als Da		□ Inconti	aida Stanaa		
☐ Septic Tank ☐ Sewer Lines	☐ Lateral Line☐ Cess Pool		] Pit Privy ] Sewage L	agoon		Livestock Per Fuel Storage		☐ Insection ☐ Abando			
☐ Watertight Sewer Line						Fertilizer Sto					
□ Watertight Sewer Lines       □ Seepage Pit       □ Feedyard       □ Fertilizer Storage       □ Oil Well/Gas Well         □ Other (Specify)       □ Oil Well/Gas Well											
Direction from well?								ft.			
10 FROM TO	LITHOLOG			FRO				HO. LOG (cont.) or		NG INTERVALS	
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
11 CONTRACTOR'S	UR LANDOWNER'S	S CERTI	FICATIO	N: This	water	well was	_ co	nstructed, ∐ reco	onstructed	, or □ plugged	
under my jurisdiction and Kansas Water Well Cont	u was completed on (m	ю-аау-уе	af) This W	ator Wall	ana th	ins record i	s tru	ted on (mo day w	y knowle	age and belief.	
under the business name of											
KS Department of Health an										ne 785-296-3565.	

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html