

	W W C-5	01-10	Di	vision of Water		W-11 ID			
	ge in Well Use			ources App. No		Well ID	NI1		
1 LOCATION OF WATER WELL:	Fraction	1.4		ction Number	Township Numb		ige Number		
County:	1/4 1/4	1/4	1/4	1 4 1 1	T S	R	□ E □ W		
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:									
Business: direction from nearest town or intersection): If at owner's address, check here:									
Address:									
City: State:	ZIP:								
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:									
WITH "A" IIV Donth(s) Groundwater Engagement (1) ft									
SECTION BOX: 1 2) ft	$\frac{1}{2}$ ft 3) ft or 4) \square Dr				Bongroude:(decimal degrees)				
N WELL'S STATIC WA	WELL'S STATIC WATER LEVEL: f				ft. Source for Latitude/Longitude:				
	below land surface, measured on (mo-day-yr)				GPS (unit make/model:)				
above land surface	above land surface, measured on (mo-day-yr)				(WAAS enabled? \(\subseteq \text{ Yes} \(\subseteq \text{ No)} \)				
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
	after hours pumpinggpm								
	Well water was ft.								
anter nour	after hours pumping gpm Estimated Yield:gpm				6 Elevation :ft. ☐ Ground Level ☐ TOC				
	Bore Hole Diameter:								
l	in. to								
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. ☐ Public Water Supply: well ID									
	6. Dewatering: how many wells?								
					ed Uncased	Geotechnica	1		
☐ Livestock 8. ☐ Monitorin	8. Monitoring: well ID				12. Geothermal: how many bores?				
	9. Environmental Remediation: well ID								
	☐ Air Sparge ☐ Soil Vapor Extraction ☐ By Open Loop ☐ Surface Discharge ☐ Inj. of Wat								
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? ☐ 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)									
SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From									
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									
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well									
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
☐ Other (Specify)									
		om well					CINTEDIALC		
10 FROM TO LITHOLO	GIC LOG		FROM	TO I	ITHO. LOG (cont.) o	r PLUGGIN	GINTERVALS		
				+					
				+					
				+					
				+					
			Notes:						
110165.									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a 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.									

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