

WATER WELL R  ☐ Original Record ☐		WWC-5		_0_0		ion of Water		Wall	ID			
		e in Well Use				rces App. No		Well		a Mumban		
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4		4 1/4	Section Number		Township Nun		Range Number R			
· ·		/4 7/		r Duro	1 Addragg v							
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:										cck licic.		
Address:												
City:	State:	ZIP:										
3 LOCATE WELL	4 DEPTH OF COM	IPLETED V	VELL:		ft	5 Latitud	de.		(d	ecimal degrees)		
WITH "X" IN	Denth(s) Groundwater Encountered: 1)											
SECTION BOX:	2) ft. 3) ft., or 4)						□ WGS 84 □ N					
	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr)					□GP	S (unit make/model:			)		
NW NE	above land surface, measured on (mo-day-yr)				(							
	Pump test data: Well water was ft. after hours pumping gpn				☐ Land Survey ☐ Topographic Map							
E E	Well water was ft.					☐ Online Mapper:						
SW   SE	after hours pumping gp											
	Estimated Yield:gpm						6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to fr				nd Source: Land Survey GPS Topographic M							
mile			Other									
7 WELL WATER TO BE USED AS:												
1. Domestic:	5. Public Wa						Field Water Supply:					
Household	6. Dewatering: how many wells?											
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID											
2. Irrigation	8. Monitoring: well ID											
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Ext					b) Open Loop Surface Discharge Inj. of Water						
4. ☐ Industrial	☐ Recovery		_				er (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 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 ft. to ft., From ft., From 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 .	16. 60		•			
☐ Septic Tank	□ Lateral Line	s $\square$ P	it Privy			ivestock Pen	Insec	ticide Sto	rage			
☐ Sewer Lines	☐ Cess Pool		ewage La	agoon		uel Storage		doned Wa		ell		
☐ Watertight Sewer Lin		□ F	eedyard		□ F	ertilizer Stor	age 🗌 Oil V	Vell/Gas V	Well			
								c				
Direction from well?  10 FROM TO	LITHOLOG		e from w	FRO!			LITHO. LOG (cont.)		CINC	INTEDVALC		
10 FROM 10	LITHOLOG	JIC LUG		FROI	IVI	10 1	LITHO. LOG (cont.)	or PLUG	UINU	INTERVALS		
				Notes	:							
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFIC	CATIO	N: This v	vater v	well was	constructed, $\square$ re	construct	ted, or	r 🗌 plugged		
under my jurisdiction an	d was completed on (m	no-day-year)			and th	is record is	true to the best of	my know	vledge	and belief.		
Kansas Water Well Cont												
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