

WATER WELL RI		WWC-5	1091	1		on of Water		W 11 ID			
		e in Well Use				ces App. No		Well ID	NY 1		
1 LOCATION OF WA	Fraction	1/		section	on Number	Township Numb		ige Number			
County:	1/4 1/4	1/4		D1	L A 11	<u>T</u> S	R	□E □W			
2 WELL OWNER: Las Business:	First:			Rural Address where well is located (if unknown, distance and							
Address:	direction					ion from nearest town or intersection): If at owner's address, check here:					
Address:											
City:	State:	ZIP:									
3 LOCATE WELL		ft	5 Lotitud	lo:		(daaimal daamaa)					
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)				. 11.						
SECTION BOX:	9 ft 2)										
N											
	measured on (r					S (unit make/model:)			
X' NE	measured on (n	measured on (mo-day-yr)ter was ft.			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map						
W E					☐ Online Mapper:						
SW SE	Well water was ft. after hours pumping gpi										
	Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC						
S											
mile					Other						
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. Dewatering: how many wells?										
☐ Lawn & Garden	7. Aquifer Recharge: well ID										
Livestock	8. Monitoring: well ID										
2. Irrigation	9. Environmental Remediation: well ID										
G. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext						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?											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter											
Casing height above land surface											
☐ 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 ft. to ft., From ft., From 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											
☐ Septic Tank☐ Sewer Lines	☐ Cess Pool					iel 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)											
Direction from well?			from we	ell?							
10 FROM TO	LITHOLOG	GIC LOG		FROM		TO L	ITHO. LOG (cont.) o	r PLUGGIN	G INTERVALS		
				1	_						
				+	-						
				+	-						
				Notes:							
	1\text{VICS.}										
				-							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged											
under my jurisdiction and	d was completed on (m	no-dav-vear)			nd th	is record is	true to the best of m	ny knowleds	ge and belief.		
Kansas Water Well Cont	ractor's License No	T	his Wa	iter Well F	Recor	d was com	oleted on (mo-day-y	ear)			
under the business name	of							· · · · · · · · · · · · · · · · · · ·			
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.											
No Department of Health an	a Environment, Bureau of V	valer, Geology Sec	auon, 10	OU SW Jacks	son St.	., Suite 420, To	ррска, капsas 00012-13	o/. reiepnone	; 103-290-3363.		

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