

WATER WELL RI		W W C-5		1110		sion of Water			W-11 ID		
Original Record    1 LOCATION OF WA		e in Well U				irces App. N		Township Numb	Well ID	naa Numban	
	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb	er Ra	nge Number □ E □ W		
County:  2 WELL OWNER: La		74 7		r Duro	1 Addragg	whor	- ~				
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		ft	5 Latitu	de.			(decimal degrees)				
WITH "X" IN	Donth(c) (Proundwater Encountered: 1)										
SECTION BOX:	2) ft. 3) ft., or 4) $\square$ I										
N	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:						
	<ul> <li>below land surface,</li> </ul>	y-yr)		□GI	PS (u	nit make/model:		)			
NW NE	above land surface, measured on (mo-day-yr)						(V	VAAS enabled?	Yes 🔲	No)	
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
WE	after hours pumping gpi					Online Mapper:					
SW - <b>X</b> SE	Well water wasft. afterhours pumpinggpr Estimated Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter:	ft. and	Source: Land Survey GPS Topographic Map								
1 mile				Other							
1 mile  in. to ft. Uniter											
1. Domestic:	5. ☐ Public Wa	ter Supply:	: well ID			10. □ Oil	Fiel	d Water Supply: 16	ease		
☐ Household	6. Dewatering: how many wells?										
☐ Lawn & Garden											
☐ Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?						
2.  Irrigation	9. Environmental Remediation: well ID										
3. ☐ Feedlot						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? ☐ Yes ☐ No											
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other											
Casing diameter											
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		,				,					
☐ Septic Tank	Lateral Line		Pit Privy			ivestock Per			cide Storage		
Sewer Lines	Cess Pool		Sewage L			Fuel Storage		· · · · · · · · · · · · · · · · · · ·	oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
☐ Other (Specify)											
10 FROM TO	LITHOLOG		ance from v	FRO				π. HO. LOG (cont.) οι		IC INTEDWALS	
10 FROM TO	LITHOLOG	alc LUG		FRO	IVI	10	LIII	HO. LOG (cont.) of	PLUGGIN	GINTERVALS	
				Notes	2.0						
11063											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was   constructed,   reconstructed, or   plugged											
under my jurisdiction an	d was completed on (m	no-dav-ve	ar)		and th	his record is	s tru	e to the best of m	y knowlec	lge and belief.	
Kansas Water Well Cont	tractor's License No		This W	ater Well	l Reco	ord was con	nplet	ed on (mo-day-y	ear)		
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.										
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KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html