

WATER WELL R  ☐ Original Record ☐		W W C-5	1000			ion of Water	l l		Well ID			
1 LOCATION OF W.		e in Well Use Fraction				rces App. No		ourshin Numb		aga Numbar		
County:	1/4 1/4 1/4 1/4 1/4			Section Number		1	Township Number T S		Range Number R □ E □ W			
2 WELL OWNER: La	First:			Dura	1 Addross v	whore	well is located					
Business:												
Business: direction from nearest town or intersection): If at owner's address, check here:												
Address:												
City:	State:	ZIP:				T						
3 LOCATE WELL	4 DEPTH OF COM	PLETED W	ELL:		ft	5 Latitu	de.			(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					ft. 5 Latitude:						
SECTION BOX:	2) ft. 3) ft., or 4) 🗆 I											
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr					GPS (unit make/model:)						
NXVNE	above land surface, measured on (mo-day-yr)				(					<b>√</b> o)		
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map							
W E	after hours pumping					☐ Online Mapper:           6 Elevation:        ft. ☐ Ground Level ☐ TOC						
SW SE	Well water was ft. after hours pumping gp											
	Estimated Yield:gpm											
S	Bore Hole Diameter: in. to				and Source: Land Survey GPS Topographic							
mile		in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:	<ol><li>Public Wa</li></ol>					10. 🔲 Oil	Field	Water Supply: 16	ease			
Household	6. ☐ Dewatering: how many wells?											
Lawn & Garden	7. Aquifer Recharge: well ID							Uncased 0				
Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?						
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID  ☐ Air Sparge ☐ Soil Vapor Ext					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. ☐ Industrial	☐ Recovery	zatraction		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 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												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		π., From	1	π. το	• • • • • • •	п., From .		It. to	It.			
Septic Tank	□ Lateral Line	es 🔲 Pit	Privy		ПΙ	ivestock Pen	16	□ Insectio	cide Storage	•		
Sewer Lines	☐ Cess Pool		vage Lag	200n		uel Storage	1.0		oned Water			
☐ Watertight Sewer Lin				5		ertilizer Stor	age		ll/Gas Well			
Other (Specify)												
Direction from well?			from we									
10 FROM TO	LITHOLOG	GIC LOG		FRON	М	TO	LITHO	D. LOG (cont.) or	PLUGGIN	G INTERVALS		
				Notes								
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged												
under my jurisdiction and was completed on (mo-day-year)												
Kansas Water Well Con	tractor's License No	T	his Wa	ter Well	Reco	rd was com	plete	d on (mo-day-v	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.												
KS Department of Health as	nd Environment, Bureau of W	Vater, Geology Se	ection, 10	00 SW Jac	kson St	t., Suite 420, 7	Гореka,	Kansas 66612-136	7. Telephon	e 785-296-3565.		