

WATER WELL RI ☐ Original Record ☐				0107		sion of Wate			Wall ID		
1 LOCATION OF WA		e in Well !				irces App. N		Tourship Numb	Well ID	aga Numbar	
	Fraction 1/4 1/4 1/4 1/4			Section Number		r	Township Numb		Range Number R □ E □ W		
County: 2 WELL OWNER: La		74 7		r Direc	1 Addraga	who	- ~				
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:				1					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN SECTION BOY. Depth(s) Groundwater Encountered: 1)					8,						
SECTION BOX: Depth(s) Groundwater Encountered. 1)											
	WELL'S STATIC WATER LEVEL:							Latitude/Longitude		VIID 21	
	below land surface, measured on (mo-day-yr)						PS (ı	ınit make/model:)	
NW NE	above land surface, measured on (mo-day-yr)							(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map						
WE	after hours pumping gp Well water was ft.					Online Mapper:					
SW SE											
	Estimated Yield:		umpinggpm			6 Elevat	tion	n:ft. ☐ Ground Level ☐ TOC			
S	Bore Hole Diameter: in. to										
1 mile			Other								
1 mile in. to ft. Uniter											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household	6. Dewatering: how many wells?										
Lawn & Garden											
☐ Livestock	8. Monitoring: well ID										
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 in. to ft., Diameter in. to ft.											
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)											
								Omer (Specify)	••••••	•••••	
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible		,				,					
☐ Septic Tank	☐ Lateral Line	s [Pit Privy			ivestock Per	ns	☐ Insection	cide Storage	;	
☐ Sewer Lines	Cess Pool		☐ Sewage L			uel Storage			oned Water		
☐ Watertight Sewer Line			☐ Feedyard		□ F	ertilizer Sto	rage	☐ Oil We	ll/Gas Well		
☐ Other (Specify)											
										IC DIEEDIAA C	
10 FROM TO	LITHOLOG	ilC LOG		FRO	M	TO	LII	HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
				Notes							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my jurisdiction and	d was completed on (m	no-dav-ve	ar)		and th	is record i	s trii	e to the best of m	v knowled	ge and belief.	
Kansas Water Well Cont	ractor's License No		This W	ater Well	Reco	ord was con	nple	ted 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.										
KS Department of Health an	a Environment, Bureau of V	vater, Geolo	ogy Section, 1	LUUU SW Jac	ckson S	t., Suite 420,	1 ope	ka, Kansas 66612-136	7. Telephon	e 185-296-3565.	

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