

WATER WELL R		WWC-5 1232	DIV	ision of Water			
				arces App. No.		Well ID	
1 LOCATION OF WATER WELL: County:		$\begin{array}{c c} Fraction \\ \hline 1/4 & 1/4 & 1/4 \end{array}$		tion Number	on Number Township Number Range Number T S R \Box E \Box W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and							
Business:	ast Ivanie.			tion from nearest town or intersection): If at owner's address, check here:			
Address:							
Address:	St-t-1						
City: 3 LOCATE WELL	State:	ZIP:					
	WITH "X" IN 4 DEPTH OF COMPLETED WELL:						
SECTION BOX:	Depth(s) Groundwater Encountered: 1) 2)			Longitude:(decimal degrees)			
Ν				□ WGS 84 □ NAD 8	33 🔲 NAD 27		
	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:		
NW NE	above land surface, measured on (mo-day-yr				(WAAS enabled? ☐ Yes ☐ No)		
	Pump test data: Well v		Land Survey Topographic Map				
W E	after hour			Online Mapper:			
SW SE	Well water wasft. after hours pumping						
	Estimated Yield:	gpm	6 Elevatio	6 Elevation:ft. Ground Level TOC			
S	Bore Hole Diameter:	. ft. and		Source: Land Survey GPS Topographic Map			
1 mile	in. to ft.				□ Other		
7 WELL WATER TO BE USED AS:							
1. Domestic: 5. Public Water Supply: well ID							
Household	6. 🗌 Dewaterin		11. Test Hole: well ID				
□ Lawn & Garden □ Livestock	7. □ Aquifer R 8. □ Monitorin		Cased Uncased Geotechnical				
2. Irrigation			12. Geothermal: how many bores?a) Closed Loop ☐ Horizontal ☐ Vertical				
3. Feedlot	9. Environmental Remediation: well ID Air Sparge Soil Vapor Extr			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? \Box Yes \Box No							
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded							
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.							
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
Steel Steinless 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. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. o ft. to ft.							
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage							
Sewer Lines	Cess Pool	Sewage Lag		Fuel Storage		ed Water Well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well							
Direction from well? ft.							
Direction from well?10 FROM	LITHOLO		FROM			LUGGING INTERVALS	
IU FROM TO	LIIHOLO	GICLUG	FROM	10 L	THO. LOG (cont.) of P	LUGOING INTERVALS	
<u>├</u> ───┤	Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged							
under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)							
under the business name	<u>e of</u>						
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.							
Visit us at <u>http://www.kdheks.gov/waterwell/index.html</u> KSA 82a-1212							