

WATER WELL RI ☐ Original Record ☐		W W C-5		0200		sion of Water			Wall ID		
1 LOCATION OF WA		e in Well U Fraction				rces App. N		Township Numb	Well ID	naa Numban	
	1/4 1/4 1/4 1/4			Section Number		r	Township Numb	er Ra R	nge Number □ E □ W		
County:		74 7		r Direc	1 Addraga	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:				T					
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	L Donth(a) (Proundwater Engountered: 1)					8,					
SECTION BOX: N 2) ft. 3) ft., or 4) □											
	_ WELL'S STATIC WATER LEVEL:				. ft. Source for Latitude/Longitude:						
	 below land surface, 	y-yr)			PS (u	ınit make/model:	e)			
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 gpr					Online Mapper:					
SW SE	Well water was ft. after hours pumping gp										
	Estimated Yield:gpm					6 Elevation :ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to ft										
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	7. Aquifer Recharge: well ID										
☐ 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 13. ☐ Other (specify):					
4. Industrial	Recovery		Injection			13. ∐ Otl	her (s	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., Diameter 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)											
□ 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											
Grout Intervals: From											
Nearest source of possible		. 10., 1 10111				, 1 10111 .					
☐ Septic Tank	☐ Lateral Line	s 🗆	Pit Privy		\Box L	ivestock Per	ns	☐ Insection	cide Storag	e	
☐ Sewer Lines	☐ Cess Pool] Sewage L			uel Storage			oned Water	Well	
☐ Watertight Sewer Line			Feedyard		□ F	ertilizer Stor	rage	☐ Oil We	ell/Gas Wel	1	
Other (Specify)											
Direction from well?			ance from v								
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LITI	HO. LOG (cont.) or	: PLUGGIN	IG INTERVALS	
				NT 4							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction and	d was completed on (n	o-dav-ve	r ICA HO ar)	TA: TUIS	water ' and th	wen was L	_ COl	nsulucieu, 🔲 Teco e to the best of m	v knowlec	, or □ prugged loe and belief	
Kansas Water Well Cont	ractor's License No	y-yc	This W	ater Well	Reco	rd was con	o u u mlet	ted on (mo-day-v	ear)	ige and belief.	
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) 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 an	d Environment, Bureau of V	Vater, Geolo	gy Section, 1	1000 SW Jac	ekson S	t., Suite 420, '	Topel	ka, Kansas 66612-136	7. Telephor	ne 785-296-3565.	

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