

WATER WELL RECOI		WWC-5		0479		ion of Water		W 11 ID			
Original Record Correc		e in Well Use	9			rces App. No		Well ID	N. 1		
		Fraction	1/ 1	/ 1/	Secti	on Number	Township Numb		ge Number		
County:			1/4 1/	4 1/4	D	1 4 11	T S	R	□ E □ W		
2 WELL OWNER: Last Name: Business:	First:					Address where well is located (if unknown, distance and					
Address:	direction	ection from nearest town or intersection): If at owner's address, check here:									
Address:	Address:										
City:	State:	ZIP:									
3 LOCATE WELL 4 DE	wri i .		ft 5 Latitude: (desired deserve)								
WITH "X" IN SECTION POY. 4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)											
SECTION BOA: $\begin{array}{c} 1 \\ 2 \\ \end{array}$ ft or $\begin{array}{c} 4 \\ \end{array}$											
WELL'S STATIC WATER LEVEL:											
□ below land surface, measured on (mo-day-ye) GPS (unit make/model:)						
above land surface, measured on (mo-				/-yr)			(WAAS enabled?				
		r was ft.			☐ Land Survey ☐ Topographic Map						
			oumpinggpm			Online Mapper:					
SW SE	Well water was ft.										
	arter nours pumpingg				om 6 Elevation:ft. ☐ Ground Level ☐ TOC						
Estimated Yield:gpm Bore Hole Diameter:in. to				ft and							
1 mile in. to											
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. Public Water Supply: well ID											
☐ Household											
			harge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical					
Livestock											
2. Irrigation	2. ☐ Irrigation 9. Environmental Remediation: well ID.				a) Closed Loop Horizontal Vertical						
3. ☐ Feedlot ☐ Air Sparge ☐ Soil V				Extraction							
4. ☐ Industrial	Recovery	∐ In	jection			13. ∐ Oth	er (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 ft., Diameter ft.											
Casing height above land surface.			• • • • • • • • • • • • • • • • • • • •	lbs	./ft.	Wall thickn	ess or gauge No				
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)											
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible contamination:											
☐ Septic Tank	□ Lateral Line		Pit Privy			ivestock Pens		cide Storage			
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well											
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
☐ Other (Specify)											
10 FROM TO	LITHOLOG		ce from v	FRO					CINTEDVALC		
10 TROW TO	LITHOLOG	nc Log		TRO	IVI	10 1	ATTIO. LOG (cont.) 0	LUUUIIN	JINTERVALS		
	-										
	-			1							
	-			1							
				Notes	 ::						
				1,000							
11 CONTRACTOR'S OR LA	ANDOWNER'S	CERTIFI	CATIO	N: This v	water v	well was \square	constructed, ☐ rec	onstructed.	or plugged		
under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Contractor'	s License No		This W	ater Well	Reco	rd was com	oleted on (mo-day-y	ear)			
under the business name of		ELL OWNER	1	£		1- E CACO	O. f 1	-11			
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.											

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