

WATER WELL R ☐ Original Record ☐		W W C-5	10002			on of Water			Well ID										
		e in Well Use Fraction				rces App. No		vynchin Numb		aga Numbar									
1 LOCATION OF WATER WELL: County:		1/4 1/4 1/4		1/4	Section Number		10	Township Number T S		Range Number R □ E □ W									
2 WELL OWNER: La				Durol	al Address where well is located (if unknown, distance and														
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:	direction from netaest to will of intersection). If we owner is address, enterin netaes																		
Address:																			
City:	State:	ZIP:				Т													
3 LOCATE WELL	4 DEPTH OF COM	IPLETED WE	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				Dongton de Careca)														
11	WELL'S STATIC WATER LEVEL:				ft. Source for Latitude/Longitude:														
	□ below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)													
NW NE																			
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map														
W E	after hours pumping gp Well water was ft.					☐ Online Mapper:													
SW XSE		s pumping gpm																	
	Estimated Yield:					6 Elevation :ft. ☐ Ground Level ☐ TOC													
S				in. to ft. and			Source: Land Survey GPS Topographic Map												
mile						□ O41													
7 WELL WATER TO BE USED AS:																			
1. Domestic:	5. 🗌 Public Wa	ter Supply: well	ID			10. 🔲 Oil	Field V	Vater Supply: 16	ease										
☐ Household	6. ☐ Dewatering: how many wells?																		
Lawn & Garden	7. Aquifer Recharge: well ID																		
Livestock	8. Monitoring: well ID							how many bores											
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID				•••	a) Closed Loop													
4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapor Extr☐ Recovery ☐ Injection					b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):													
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:																			
Water well disinfected?																			
8 TYPE OF CASING USED: Steel PVC Other																			
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 ☐ Ga	auze Wrapped	☐ Tor	ch Cut	Dril	lled Holes	☐ Oth	er (Specify)											
	☐ Key Punched ☐ W					ne (Open Ho													
SCREEN-PERFORATED INTERVALS: From																			
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.																			
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other																			
Grout Intervals: From		ft., From	f	t. to		ft., From .	• • • • • • • • • • • • • • • • • • • •	ft. to	ft.										
Nearest source of possible	e contamination: Lateral Line	- □ D:4 D	·		Пт:		_	□ I	.:										
☐ Septic Tank ☐ Sewer Lines	☐ Cess Pool	es				ivestock Pen uel Storage	iS		cide Storage oned Water										
☐ Watertight Sewer Lin						ertilizer Stor	age		ll/Gas Well										
Other (Specify)																			
Direction from well?								ft.											
10 FROM TO	LITHOLOG	GIC LOG		FROM	1	TO 1	LITHO	. LOG (cont.) oı	PLUGGIN	G INTERVALS									
Notes:																			
11 CONTRA CECE:	OD I ANDOMINES	OEDWITE :	mre:	TD1:		11 -	1												
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	a was completed on (m	10-day-year)	nie Wes	a	na th	is record is	true to	on (me day y	y Knowled	ge and belief.									
under the business name	e of	11	ns wa	vveili	NECOI	u was coll	hierea	on (mo-day-y	cai)										
under the business name of																			
									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.										