

Original Record		W W C-5		0400		sion of Water			Wall ID		
		e in Well U				irces App. N		Township Numb	Well ID	nga Numbar	
1 LOCATION OF WATER WELL:		Fraction		⁄ ₄ 1⁄ ₄	Section Number		r	Township Numb		Range Number R □ E □ W	
County:		/4 /		r Duro	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:										check here.	
Address:											
City:	State:	ZIP:									
3 LOCATE WELL		ft	5 Latitu	ıde.			(decimal degrees)				
WITH "X" IN	L Donth(c) (Proundwater Encountered: 1)										
SECTION BOX:	2) ft. 3) ft., or 4) \square I										
N	WELL'S STATIC WATER LEVEL:				t. Source for Latitude/Longitude:						
	 below land surface, 	/-yr)			PS (u	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						
W E	after hours pumping gpr					☐ Online Mapper:					
SW SE 🗙	Well water was ft.										
	after hours pumping gpr Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Bore Hole Diameter:	ft and									
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 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 ft., from ft., From ft., From ft. to ft.											
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		. 10., 1 10111		. 11. 10		10., 1 10111 .					
Septic Tank	Lateral Line	s 🗆	Pit Privy			ivestock Per	ns	☐ Insection	cide Storage	e	
Sewer Lines	Cess Pool		Sewage L	agoon		uel Storage			oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
☐ Other (Specify)											
			ance from v								
10 FROM TO	LITHOLOG	FIC LOG		FRO	M	TO	LIT	HO. LOG (cont.) or	PLUGGIN	IG INTERVALS	
				N T 4							
Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged											
under my jurisdiction an	OK LANDOWNER'S	O-day ya	rICATIO ar)	in: Inis	water	well was L	_ COI	iistructed, 🔲 rect	onstructed,	or plugged	
Kansas Water Well Cont	a was completed on (II. tractor's License No	io-uay-ye	ar) Thic W	ater Well	anu ti Reco	nd was con	ง แนเ ากไคร	ed on (mo-day-v	.y Kilowiec ear)	ge and bellet.	
under the business name of											
KS Department of Health ar	d Environment, Bureau of V	Vater, Geolo	gy Section, 1	000 SW Jac	ekson S	t., Suite 420,	Topel	ka, Kansas 66612-136	7. Telephor	ie 785-296-3565.	

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