

# Northwest Local Environmental Protection Group (NWLEPG)

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Serving the following Counties: Cheyenne, Decatur, Gove, Greeley, Lane, Logan, Rawlins,  
Scott, Sheridan, Sherman, Thomas, Trego, and Wallace

LATITUDE

LONGITUDE

## Domestic Private Water Well Permit # \_\_\_\_\_

This **Water Well Permit** requires a **\$100.00 fee** to be paid to the Northwest Local Environmental Protection Group (NWLEPG) office and this form shall be completed **prior** to drilling the well. The fee may be paid by either, the land owner or the Licensed Water Well Driller. **This form and fee are good for ONE year from the Permit Date listed below.** Failure to complete the well in the ONE year period will require Owner/Contractor to re-file this Form and the corresponding fee.

Permit Date: \_\_\_\_\_ Proposed Date: \_\_\_\_\_ Site Acreage / Lot Size: \_\_\_\_\_

Legal: \_\_\_\_\_ Tract: \_\_\_\_\_<sup>1/4</sup> \_\_\_\_\_<sup>1/4</sup> \_\_\_\_\_<sup>1/4</sup> \_\_\_\_\_<sup>1/4</sup> Sect: \_\_\_\_\_ Twsp: \_\_\_\_\_ Rnge: \_\_\_\_\_ County: \_\_\_\_\_  
2.5 ac      10 ac      40 ac      160 ac

County/Town/Subdiv: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

**Owner's or Tenant:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Site Address (if different): \_\_\_\_\_

Directions to well site from town: \_\_\_\_\_

**Driller-Name:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

**Driller's License #:** \_\_\_\_\_ E-mail: \_\_\_\_\_

Construction of new water wells must meet minimum separation distances from pollution sources as required in the County Environmental Sanitary Code and State requirements listed in "Article 30 Water Well Construction Guideline." County codes may be more stringent than the State regulations. Please refer to the applicable County Code. Copies may be obtained from the NWLEPG.

**I understand and agree that the issuance of this permit to develop a non-public water supply shall not be construed or interpreted as imposing or interfering with the Laws of the State of Kansas relating to the authority of the Chief Water Engineer.**

Neither is there any warranty implied or inferred that this water well will function properly. **Landowner assumes responsibility** for ensuring that this non-public water well is drilled and installed by a water well driller who is licensed to work in Kansas. This water well will be drilled according to regulation in **Article 30- "Water Well Contractor's License Water Well Construction and Abandonment,"** regulating the construction, reconstruction, treatment and plugging of water wells and sets forth procedures for the licensing of water well contractors as required by K.S.A. 82a-1201 to 82a 1215 and amendments thereto.

Owner Signature

Date

Owner (Printed name)

**Upon agreement and signature by landowner, well owner, or agent. Permit is hereby granted.**

**Submit this form to the: NWLEPG (address above) 10 days prior to well construction.**

**If you should encounter an emergency you must call us before drilling. Fill out the back side of this form.**

(Back Side) →

**Preliminary Proposed Site Sketch of: House, Buildings, Water Well(s), Waste Water System, Property Lines  
This includes neighboring wells and wastewater systems. (WWC-5 form will be attached when complete).**

Mark one or both: \_\_\_\_\_ Livestock      \_\_\_\_\_ Domestic

**\*\*\*These are Minimum Distant Requirements in the Local Codes. These must ALL be checked off.**

- \_\_\_ Fuel, fertilizer or pesticides storage 50'
- \_\_\_ Streams, lakes or ponds 50'
- \_\_\_ Barnyards, stables, manure piles or animal pens 50'
- \_\_\_ Well to Property Line, Easements, Right-a-ways 25'
- \_\_\_ Well to Septic tank and sewer lines 50'
- \_\_\_ Well to Leach Field 100'
- \_\_\_ Request Waiver if the above distances cannot be met (Waiver must be approved before drilling)
- \_\_\_ Well to neighbors Septic Tank 50'
- \_\_\_ Well to Neighbor's Leach Field 100'

**\*\*\*A FREE bacteria & nitrate water test will be taken when the well is complete\*\*\***

**Office Use Only:**

**NWLEPG Information & Comments:** \_\_\_\_\_ **Date Well Permit Received:** \_\_\_\_\_

- Well Permit by Phone     By Site Evaluation     By Office Visit     By Fax     By Mail
- Well Permit fee PAID by: \_\_\_\_\_ CK # - Cash: \_\_\_\_\_ Date: \_\_\_\_\_
- Inspection Date: \_\_\_\_\_