

KENTUCKY SPRING INVENTORY FORM

(1) **SPRING IDENTIFICATION NUMBER:** -

Official Use Only

Do not write in this space

(2) **GENERAL INFORMATION**
 Spring owner's name: _____ () unknown
 Mailing Address: _____ () unknown
 City: _____ State: _____ Zip: _____
 Phone: () _____ () no phone () unknown

(3) SPRING LOCATION	County _____	Quadrangle _____	Latitude _____	Longitude _____	Elevation () map _____ () survey _____ ft.
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(4) NAME OF SPRING () unnamed _____	(5) PHYSIOGRAPHIC OR HYDROLOGIC REGION () Bluegrass () Ohio River Alluvium () E. Coal Field () Miss. Plateau () Jackson Purchase () W. Coal Field	(6) ATTACHMENTS () Topographic map () Other: _____
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(7) **PHYSICAL SETTING**
Primary Spring Type:
 () gravity (*falling*) () trickle
 () bluehole (*rising*) () seep

Secondary Characteristics:
 (mark all that apply)
 () karst window () perched
 () sinking spring () gravel
 () epikarst () mineral
 () estavelle () fracture
 () other: _____

(8) **SPRING DISCHARGE**
 () perennial () seasonal () intermittent
 _____ () cfs () gpm () l/s
 () measured () estimated
 () reported () not determined

Please see worksheet and instructions for assistance in calculation of spring discharge.

(12) **SPRING USE**
 () domestic () irrigation () public supply
 () industrial () livestock () monitoring
 () unregulated public access () unused
 () other: _____

PWSID#: _____

Water Withdrawal Permit #: _____

(14) **TREATMENT SYSTEMS**
 () none
 () water softener
 () ultraviolet
 () chlorination
 () aeration
 () charcoal filter
 () sand filter
 () iron inhibitor
 () settling tank
 () other _____

Treatment Bypass Available?
 () yes () no

Aquifer Media:
 () limestone () sandstone
 () dolostone () coal
 () shale/siltstone () alluvium
 () unknown
 () other: _____

(9) **SURFACE FLOW CONDITIONS**
Season:
 () winter (November - April)
 () summer (May - October)

Flow condition:
 () low () moderate () high

(13) **SPRING SERVICE**
Number of people served: _____
Number of service connections: _____
Quantity problems () yes () no () unknown
Quality problems? () yes () no () unknown
 Use Comments Section to describe any problems

Spring Discharges From:
 () conduit () mine adit
 () bedding plane () soil
 () cave () fill
 () fracture () unknown
 () talus/loose rock

Spring Discharges To:
 () stream () pond or lake
 () sinkhole () holding tank
 () soil () wetland

(10) **MODIFICATIONS** (mark all that apply)
 () spring house () gravity pipe
 () spring box () pump
 () walled pond () dam
 () storage trough or tank () none
 () other (describe in Comments)

(15) **INSPECTION INFORMATION**
Date of Inspection: _____
Water Sample Taken? () yes () no
Reason for Inspection:
 () general survey
 () specific complaint investigation
 () spill or incident response
 () contamination site investigation
 () enforcement
 () general water quality analysis
 () ambient groundwater monitoring
 () other (describe in Comments)

Program Name and Facility ID#: _____

Alternate Spring ID# _____

(16) **OPTIONAL USE**
Will Owner Allow State Access?
 () yes () no () unknown

Extent of Monitoring Allowed:
 () complete access
 () collect sample
 () access to spring/springhouse
 () modify spring
 () notification required
 () other (describe in Comments)

Monitoring Feasibility:

Name of Receiving Water Body: _____

(11) **DYE TRACE INFORMATION**
 Has a trace been made to/from this site?
 () Yes () No () Unknown

Investigator: _____
 Project: _____
 Date: _____
 Comments: _____

(17) **Sketch Map** (show spring and associated features)

(18) **COMMENTS**

(19) **INVESTIGATOR IDENTIFICATION**
Name: _____
Last First MI Inspector ID#

Agency: () CHR () DOW () DWM () KGS () Other: _____

Signature of Inspector: _____ **Date:** _____