

W	_		RECORD	-	WWC-5 1074			sion of Wate		W	/ell ID		
1		Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction						11			ge Number		
-	County			1/4 1/4 1/4	1⁄4		$\begin{array}{c c} T & S & R & \Box E \Box W \end{array}$						
2	WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance direction from nearest town or intersection): If at owner's address, check he Address: Address: City: State: ZIP:												
3	LOCAT	E WELL											
	WITH "			IPLETED WELL: . Encountered: 1)									
W	SECTIO NW X - SW	N NE E	2) WELL'S ST below 1 above 1 Pump test d after	b) ft., or 4) □ Dry Well TER LEVEL: ft. measured on (mo-day-yr) measured on (mo-day-yr) ater was ft. pumping gpm ater was ft.			Longitude:						
		30		pumping	gpm		6 Elevation:ft. Ground Level TOC						
		s	Estimated Y		gpm in. to ft. and			Source: Land Survey GPS Topographic Map					
	، 1 n1	-	Bole Hole I	in. to ft.									
7	WELL WATER TO BE USED AS:												
2.	Domestic: Housel Lawn & Livesto Irrigati	nold & Garden ock on	6. [_ 7. [_ 8. [_ 9. Ei) 	·····	 10. □ Oil Field Water Supply: lease 11. Test Hole: well ID □ Cased □ Uncased □ Geotechnical 12. Geothermal: how many bores? a) Closed Loop □ Horizontal □ Vertical 							
	☐ Feedlo		Air Sparge	Extraction	1	b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water							
	4. Industrial Recovery Injection 13. Other (specify):												
	Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
						0	ACINI						
Ca Ca T` S(8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. to in. Weight lbs./ft. Wall thickness or gauge No. ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. ft. TYPE OF SCREEN OR PERFORATION MATERIAL:												
9	9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From													
Nearest source of possible contamination:													
	FROM	ТО		ITHOLOG		FRO				HO. LOG (cont.) or PL	UGGINC	JINTERVALS	
						-							
						Notes							
un Ka	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)												
under the business name of													
	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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. Visit us at <u>http://www.kdheks.gov/waterwell/index.html</u> KSA 82a-1212												