

| | | RECORD | | WWC- | 5 | 8287 | | sion of Wate | | | | | |
|---|--|-------------------|--|---|----------------|------------------------|------------------|----------------------------------|--------|------------------------|-----------|--------------------|--|
| Original Record Correction Change in Well Use | | | | | | | Resources App. N | | | | | | |
| 1LOCATION OF WATER WELL:FractionCounty:1/41/4 | | | | | | 4 1/4 | | | | | | | |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and | | | | | | | | | | | | | |
| Business: | Last I vanie. | 1 1130. | | ection from nearest town or intersection): If at owner's address, check here: | | | | | | | | | |
| Address: | | | | | | | | | | | | | |
| Address: City: | | | State: | ZIP: | | | | | | | | | |
| 3 LOCAT | E WELL | | | | | | | | | | | | |
| WITH "X" IN 4 DEPTH OF COMPLETED WELL: | | | | | | | | | | | | | |
| | ECTION BOX:Depth(s) Groundwater Encountered: 1)N $2)$ | | | | | | | | | | | | |
| I I | WELL'S STATIC WATER LEVEL: | | | | | | | | | | | | |
| | | | neasured on (mo-day-yr) | | | GPS (unit make/model:) | | | | | | | |
| _{NW} X- | NE | above l | above land surface, measured on (mo-day-yr) | | | | | | | WAAS enabled? | | | |
| | | ~ | | ater was ft. | | | | Land Survey Topographic Map | | | | | |
| W | E | after | after hours pumping gp Well water was ft. | | | | | Online Mapper: | | | | | |
| SW | SE | after | after hours pumping | | | | | | | | | | |
| | | | Estimated Yield:gpm | | | | | 6 Elevation:ft. 🗆 Ground Level 🗆 | | | | | |
| | S | | Bore Hole Diameter: in. to | | | | | | | Land Survey | | | |
| 1 r | | | | in. to ft. | | | □ Other | | | | | | |
| 7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease | | | | | | | | | | | | | |
| | 1. Domestic: 5. □ Public Water Supply: well ID □ Household 6. □ Dewatering: how many wells? | | | | | | | | | | | | |
| | Household 6. Dewatering: how many wells? Lawn & Garden 7. Aquifer Recharge: well ID | | | | | | | | | | | | |
| | Livestock 8. Monitoring: well ID | | | | | | | | | al: how many bores | | | |
| 2. 🗍 Irrigati | _ c | | | | | | | | | Loop 🗌 Horizonta | | | |
| | 3. 🗌 Feedlot 🗌 Air Sparge 🗌 Soil Vapor Ex | | | | | | | | | Loop 🗌 Surface Dis | | | |
| 4. Industrial Recovery Injection 13. Other (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 JOINTS: Glued Clamped Welded Threaded | | | | | | | | | | | | | |
| Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No | | | | | | | | | | | | | |
| | | R PERFORA | | | | 105 | ./It. | wall unch | 11055 | of gauge No | | | |
| | | unless Steel | Fiber | | □ PVC | | | □ Oth | ner (S | Specify) | | | |
| Steel Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole) | | | | | | | | | | | | | |
| SCREEN C | SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | | |
| | uous Slot | ☐ Mill Slot | | auze Wrap | | | | | | Other (Specify) | | | |
| | | Key Puncl | | | | | | | | | c | | |
| | | | | | | | | | | ft., From ft., From | | | |
| | | | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | | | |
| Nearest sou | rce of possi | ble contaminati | | | | | | , | | | | | |
| | | | Lateral Line | es [| Pit Privy | | | livestock Pe | | Insectic | | | |
| Sewer] | | | Cess Pool | | Sewage L | agoon | | Fuel Storage | | Abando | | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | | | | | |
| Direction from well? ft. | | | | | | | | | | | | | |
| 10 FROM | TO | | ITHOLO | | | FRO | | | | HO. LOG (cont.) or | | ING INTERVALS | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | Notes | : | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged | | | | | | | | | | | | |
| under my ju | under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. | | | | | | | | | | | | |
| Kansas Water Well Contractor's License No | | | | | | | | | | | | | |
| under the business name of | | | | | | | | | | | | | |
| KS Departr | nent of Health | and Environment | , Bureau of V | Water, Geol | ogy Section, 1 | 000 SW Jac | kson S | t., Suite 420, | Tope | ka, Kansas 66612-136 | 7. Teleph | none 785-296-3565. | |
| Visit us at h | <u>ttp://www.kdl</u> | neks.gov/waterwel | I/index.html | | | | | | | | | KSA 82a-1212 | |