

	WELL R			WWC-5		6272		sion of Wate			Well II		
Original Record Correction Change in W								Resources App. No.		Township Number			
1 LOCATION OF WATER WELL: County:Fraction1/41/41/41/4							Section NumberTownship NumberRange Number $\frac{1}{4}$ TSREW						
		ast Name:		First:	r Rura	ral Address where well is located (if unknown, distance and							
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, dis direction from nearest town or intersection): If at owner's address, che											· · · · · · · · · · · · · · · · · · ·		
Address:												,, 	
Address: City: State: ZIP:													
3 LOCATE WELL													
WITH "			4 DEPTH OF COMPLETED WELL:					ft. 5 Latitude:(decimal degrees)					
SECTIO			n(s) Groundwater Encountered: 1)										
N	I	2) ft. 3) ft., or 4) □ Dry Well WELL'S STATIC WATER LEVEL: ft.								WGS 84 INAD	83	NAD 27	
		below land surface, measured on (mo-day-yr)								Latitude/Longitude:)	
NW	NF	above land surface, measured on (mo day yr)						☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)					
		Pump test data: Well water was ft.						□ Land Survey □ Topographic Map					
w	X E	after	after hours pumping							e Mapper:			
SW	SE	Well water was ft.											
		after hours pumping gpm Estimated Yield:gpm						6 Eleva	6 Elevation:ft. Ground Level TOC				
	5		Bore Hole Diameter: in. to ft. and					Source: Land Survey GPS Topographic Map					
1 n	nile	in. to ft.						□ Other					
) BE USED A	AS:										
1. Domestic: 5. □ Public Water Supply: well ID													
☐ Housel ☐ Lawn &		6. Dewatering: how many wells?							11. Test Hole: well ID				
			7. Aquifer Recharge: well ID						Cased Uncased Geotechnical othermal: how many bores?				
2. Irrigati										Loop 🗌 Horizonta			
3. 🗌 Feedlot			Air Sparg		oil Vapor					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													
Casing height above land surface													
SCREEN C	SCREEN OR PERFORATION OPENINGS ARE:												
	uous Slot	☐ Mill Slot		auze Wrappe						Other (Specify)			
		Key Puncl						one (Open H				2	
										ft., From			
										ft., From			
										ft. to		,	
		e contaminati				10 10 111							
Septic 7			Lateral Line		it Privy			livestock Pe		Insectici			
Sewer I			Cess Pool		ewage La	agoon		Fuel Storage					
U Waterti	ght Sewer Li	nes 🔲	Seepage Pit		Feedyard		Πŀ	Fertilizer Sto	orage	🗌 Oil Well	l/Gas We	:11	
										ft.			
10 FROM	TO		ITHOLO			FRC		TO		HO. LOG (cont.) or	PLUGGI	NG INTERVALS	
						_							
						Note	s:						
										onstructed, \Box record			
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													
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.													
-					Section, 1	000 SW Ja	ckson S	st., Suite 420,	Tope	eka, Kansas 66612-1367		one 785-296-3565. KSA 82a-1212	
visit us at h	up://www.Kahe	ks.gov/waterwel	n/maex.ntml								1	NOM 020-1212	