

W	_		RECORD		WWC-5 1283			ion of Wat			Well ID		
1	- 0	Original Record Correction Change in Well Use COCATION OF WATER WELL: Fraction						11				ge Number	
-	County: $1/4$ $1/4$ $1/4$						$\begin{array}{c c} T & S \\ T & S \\ \hline R & \Box E \Box W \end{array}$						
2	2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, dist direction from nearest town or intersection): If at owner's address, chec Address: Address: City: State: ZIP:												
3	LOCAT	E WELL											
		4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)						5 Latitude:(decimal degrees) Longitude:(decimal degrees)					
W	SECTIO NW X SW	N NE 	2) WELL'S ST below h above ha Pump test da after	ATIC WA ATIC WA and surface, and surface, ata: Well w hours Well w	3) ft., or 4) [TER LEVEL: , measured on (mo-day- , measured on (mo-day- vater was ft ; pumping ft ; pumping ft ; pumping	Dry Wel ft. yr) yr) t. gpm t.		Datum: 🗌 WGS 84 📄 NAD 83 📄 NAD 27 <u>Source for Latitude/Longitude</u> :					
		Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC					
	-	S aila	Bore Hole I	Bore Hole Diameter: in. to ft. and					Source: Land Survey GPS Topographic Map Other				
	Imile												
1. 2. 3.	WELL Domestic: Housel Lawn Livesto Irrigati Feedlo Industr	nold & Garden ock on t	5. Public Water Supply: well ID 6. Dewatering: how many wells?					 10. Oil Field Water Supply: lease 11. Test Hole: well ID Cased Ducased Geotechnical 12. Geothermal: how many bores? a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water 13. Other (specify): 					
	Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box No If yes, date sample was submitted:												
	8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Ca Ca T` S(Casing diameterin. toft., Diameterin. toft., Diameterin. toft. Casing height above land surfacein. Weight												
					n ft. to								
					Cement grout Be								
Grout Intervals: From													
	FROM	TO		ITHOLOG		FROM		ТО	LIT	HO. LOG (cont.) or P	LUGGIN	TINTERVALS	
10	110101	10	L				-	10			200010		
						Notes:			1				
un Ka	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged 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 This Water Well Record 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 constructed 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.												
			neks.gov/waterwel				-	- ,	1			A 82a-1212	