Form WWG WAFER WELL RECORD Division of Water Original Record Correction Change in Well Use Resources App. No. 1 LOCATION OF WATER WELL: Section Number Range Number Township Number County: 6 CAN ((a) WELL OWNER: Last Name: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: Business: 3 LOCATE WELL 4 DEPTH OF COMPLETED V WITH "X" IN **SECTION BOX:** 2) ft. 3) ft, or 4) \square Dry Well Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude: below land surface, measured on (mo-day-yr)..... GPS (unit make/model:) above land surface, measured on (mo-day-yr)..... - NW - -- - NF - -(WAAS enabled? ☐ Yes ☐ No) Pump test data: Well water was ft. ☐ Land Survey ☐ Topographic Map after..... hours pumping gpm Online Mapper: Well water was ft. X. sw --6 Elevation: 1.0.45.....ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map Bore Hole Diameter:fi... in. to ft. and S ☐ Other -----1 mile-----10. Oil Field Water Supply: lease 7 WELL WATER TO BE USED AS: Wes 5. Public Water Supply: well ID 1. Domestic: ☐ Household 6. Dewatering: how many wells? II. Test Hole: well ID 7. Aquifer Recharge: well ID ☐ Cased ☐ Uncased ☐ Geotechnical ☐ Lawn & Garden ☐ Livestock 8. Monitoring: well ID 12. Geothermal: how many bores? 9. Environmental Remediation: well ID 2.

Irrigation 3.

Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction 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: Water well disinfected? Yes No 8 TYPE OF CASING USED: Steel Casing diameter in. to 13. ft., Diameter in. to ft. Casing height above land surface of the first land to the first land TYPE OF SCREEN OR PERFORATION MATERIAL: □ PVC ☐ Stainless Steel ☐ Fiberglass Other (Specify) ☐ Steel ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) ☐ Continuous Slot ☐ Mill Slot ☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole) Nearest source of possible contamination: ☐ Lateral Lines ☐ Livestock Pens ☐ Pit Privy ☐ Septic Tank ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well Other (Specify) Direction from well? Distance from well? LITHO. LOG (cont.) or PLUGGING INTERVALS FROM 10 FROM LITHOLOGIC LOG Notes: INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565. KSA 82a-1212 Revised 9/10/2012

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