

WATER WELL		WWC-5 1160	DI	vision of Water			
Original Record Correction Chang I LOCATION OF WATER WELL:				ources App. No ction Number		Well ID Range Number	
County:	WAIER WELL:	$\frac{1}{14}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$			$\begin{array}{c c c c c c c c c c c c c c c c c c c $		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and							
Business: direction from nearest town or intersection): If at owner's address, check here:							
Address: Address:							
City: State: ZIP:							
3 LOCATE WELL							
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)						
SECTION BOX:		3) ft., or 4)		Longitude:(decimal degrees) Datum: 🗌 WGS 84 🔄 NAD 83 🔄 NAD 27			
Ν		$TER LEVEL: \dots$			Source for Latitude/Longitude:		
			neasured on (mo-day-yr)		GPS (unit make/model:)		
NW NE	Pump test data: Well water was ft.				(WAAS enabled? Yes No)		
					□ Land Survey □ Topographic Map		
W	after hours pumping gpm Well water was ft.			□ Online Mapper:			
SW SE	- SE - after hours numning gnm						
	Estimated Yield:	5P		6 Elevation:ft. Ground Level TOC			
S	Bore Hole Diameter: .		Source: Land Survey GPS Topographic Map				
	1 mile Other in. to ft.						
7 WELL WATER TO BE USED AS:							
1. Domestic:							
Lawn & Garden							
		7. 🗌 Aquifer Recharge: well ID 8. 🔲 Monitoring: well ID			12. Geothermal: how many bores?		
2. Irrigation	9. Environmental Remediation: well ID			a) Closed Loop			
3. 🗌 Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction			b) Op	b) Open Loop 🔲 Surface Discharge 🔲 Inj. of Water		
4. 🗌 Industrial	4. \Box Industrial \Box Recovery \Box Injection13. \Box 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 ft.							
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No							
□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)							
\square Brass \square Galvanized Steel \square Concrete tile \square None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)							
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)							
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. to ft.							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Nearest source of possible contamination:							
□ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ 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							
Direction from well? ft.							
10 FROM TO	LITHOLO		FROM			LUGGING INTERVALS	
			TROM				
Notes:							
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 C	ontractor's License No	This Wa	ter Well Re	cord was com	pleted on (mo-day-year	r)	
under the business na	me of				00 f		
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.							
_	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212						