

		_	RECORD	-	WWC-5 1062			ion of Wat					
					e in Well Use		Resources App. No.		1	Well ID			
	1 LOCATION OF WATER WELL:							on Numbe	er	Township Number			
	County									R			
B A	VELL Susiness: Address: Address:	OWNER:	Last Name:		First:		treet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:						
	City: State: ZIP:												
3 L	LOCATE WELL 4 DEPTH OF COMPLETED WELL:							ft 5 Lotitudo.					
	WITH "A" IN Depth(a) Groundwater Encountered: 1)						11.	5 Latitude:(decimal degrees) Longitude:(decimal degrees)					
S		N BOX:		Dry We	11	Datum: 🗌 WGS 84 📄 NAD 83 📄 NAD 27							
_	WELL'S STATIC WATER LEVEL:							Source for Latitude/Longitude:					
				below land surface, measured on (mo-day-yr)					GPS (unit make/model:)				
	- NW	NE		above land surface, measured on (mo-day-yr)					(WAAS enabled?  Yes No)				
				Pump test data: Well water was ft. after hours pumping gpm					Land Survey      Topographic Map				
W	x	SE	anci	Well water was ft.					Online Mapper:				
	- SW	SE	after	after hours pumping gpm									
			Estimated Y	Estimated Yield:gpm					6 Elevation:ft.  Ground Level  TOC				
	-	S.	Bore Hole D	Bore Hole Diameter: in. to ft. and					Source:  Land Survey  GPS  Topographic Map				
1 mile  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												
	Housel			g: how many wells?		11. Test Hole: well ID							
		& Garden		7. Aquifer Recharge: well ID									
	Livesto			g: well ID		12. Geothermal: how many bores?							
	Irrigation 9. Environmental Remediation: well ID									Loop Horizonta			
3. $\Box$ Feedlot $\Box$ Air Spar								b) Open Loop $\Box$ Surface Discharge $\Box$ Inj. of Water					
	4. Industrial Recovery Injection 13. Other (specify):												
	Was a chemical/bacteriological sample submitted to KDHE? $\Box$ Yes $\Box$ No If yes, date sample was submitted:												
						C	CINI		·.		□ W-14-		
	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													
	TYPE OF SCREEN OR PERFORATION MATERIAL:												
	□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)												
Brass Galvanized Steel Concrete tile None used (open hole)													
	SCREEN OR PERFORATION OPENINGS ARE:												
		uous Slot	☐ Mill Slot ☐ Key Punch		auze Wrapped			illed Holes ine (Open H		Other (Specify)	•••••		
					n ft. to			× 1		ft From	ft to	ft	
ben					n ft. to								
9 G					Cement grout Be								
Grou	t Interva	als: From .	ft. to		ft., From								
			ble contamination				<b>—</b> -			<b>—</b>			
	Septic Sewer I			Lateral Line	es 🗌 Pit Privy			ivestock Pe uel Storage	ens	☐ Insectici ☐ Abandor		Wall	
			ines DS	leenage Pit	☐ Sewage La	igoon		ertilizer Sto	; orage			wen	
	Other (	Specify)	·····		s				oruge				
Direc	ction fro	om well?			Distance from w	vell?							
10 F	ROM	TO	L	ITHOLOG	GIC LOG	FROM	Λ	ТО	LIT	HO. LOG (cont.) or I	PLUGGIN	G INTERVALS	
						Notes	: -						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged													
					no-day-year)								
Kans	sas Wa	ter Well Co	ontractor's Lice	nse No	This W	ater Well	Reco	rd was con	mple	ted on (mo-day-yea	ar)		
unde	er the b	usiness nar	<u>ne of</u>				<u></u>	·····		·····			
KS	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/waterwell		,, ,, <b>,</b>				· · r •			A 82a-1212	