

W			RECORD		· · · C-3	6411		sion of Wat			Well ID		
1		Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction					Resources App. No. Section Number			Township Number Range Number			
T	County: 1/4 1/4 1/4						4					$\Box E \Box W$	
2			Last Name:		First:			al Address	whe	ere well is located (
-	Business: di Address: Address:							lirection from nearest town or intersection): If at owner's address, check here:					
2	City:			State:	ZIP:								
3		LOCATE WELL WITH "X" IN4 DEPTH OF COMPLETED WELL:						5 Latit	ude:			(decimal degrees)	
	SECTIO			Encountered: 1)					e:				
	Ν	1	ft. 3					WGS 84 🗌 NAD	83 🗆 N	IAD 27			
	WELL'S STATIC WATER LEVEL:									Latitude/Longitude:		`	
	NW	NE		□ above land surface, measured on (mo day-yr)						unit make/model:			
		NL		Pump test data: Well water was ft.					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
W			after		s pumping				Online Mapper:				
	SW	SE Well water was ft.											
		after						6 Elevation:ft. Ground Level				l Level □ TOC	
		S Bore Hole Diameter:											
	1 n	nile		ft.		□ Other							
7 WELL WATER TO BE USED AS:													
	Domestic: 5.												
	☐ Household 6. ☐ Dewatering: how many well								11. Test Hole: well ID				
	_	Lawn & Garden 7. Aquifer Recharge: well ID Livestock 8. Monitoring: well ID											
		□ Livestock 8. □ Monitoring: well ID □ Irrigation 9. Environmental Remediation: well ID								Loop 🗌 Horizonta			
	. Feedlot Air Sparge Soil Vapor E							b) Open Loop Surface Discharge Inj. of Water					
4.	🗌 Industr	ial		Recovery	□ Injection			13. 🗌 Other (specify):					
W	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												
1	I TPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)												
	Brass Galvanized Steel Concrete tile None used (open hole)												
SC	SCREEN OR PERFORATION OPENINGS ARE:												
		uous Slot	☐ Mill Slot							Other (Specify)			
								one (Open H	,		C	c	
20					n ft. to ft. to								
9	GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. o ft. o ft. o ft. o ft. o ft. to ft. o ft. to ft. o ft. f												
					ft., From								
		-	ible contaminati										
	Septic '			Lateral Line				Livestock Pe					
	Sewer I Waterti	ines ght Sewer l		Cess Pool Seepage Pit	☐ Sewage I ☐ Feedyard	Lagoon		Fuel Storage Fertilizer Sto		Abandon		well	
			·····						Jiage				
					Distance from	well?				ft.			
10	FROM	TO	I	ITHOLO	GIC LOG	FI	ROM	ТО	LIT	HO. LOG (cont.) or l	PLUGGIN	G INTERVALS	
			1										
						No	otes:						
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													
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.												
	Visit us at <u>h</u>	ttp://www.kd	lheks.gov/waterwel	l/index.html							KS	SA 82a-1212	