

		RECORD		WWC-5		5357		sion of Wate					
Original Record Correction Change in Well U					se			rces App. No. on Number Township Numl			Well ID		
1 LOCATION OF WATER WELL: Fraction					1/4 1	/ 1/						inge Number	
County		1⁄4		$\begin{array}{c c c c c c c c c c c c c c c c c c c $									
	OWNER: 1	Last Name:		First:			treet or Rural Address where well is located (if unknown, distance and						
Business: dire Address:								rection from nearest town or intersection): If at owner's address, check here:					
Address:													
City: State: ZIP:													
3 LOCAT	E WELL				AVEL 1		C.						
WITH "	X" IN		4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)										
SECTIO				ry Well Datum: 🗌 WGS 84 🗌 NAD 83 🗌 NAD 27									
Ν	٧		2) ft. 3) ft., or 4) □ I WELL'S STATIC WATER LEVEL:					NAD 27					
		below land surface, measured on (mo-day-yr))	
NW	NIE		above land surface, measured on (mo-day-yr)										
19 vv	NL		Pump test data: Well water was ft.										
w	E	-	after hours pumping							e Mapper:			
			Well water was ft.					**					
SW	SE - 🗙		after hours pumping gpn										
			Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC				
	S	Bore Hole I	Bore Hole Diameter: in. to							Land Survey GPS Topographic Map			
1 mile in. to ft.													
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Dublic Water Supply: well ID 10. Doil Field Water Supply: lease													
1. Domestic:													
Housel			6. Dewatering: how many wells?						11. Test Hole: well ID				
\Box Lawn d			7. Aquifer Recharge: well ID							sed Uncased Geotechnical ermal: how many bores?			
	Livestock 8. Monitoring: well ID												
	2. Intrigation 9. Environmental Remediation: well ID 3. Feedlot Intrigation									Loop Horizonta			
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:													
								a ton ma					
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)													
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:													
	nuous Slot	Mill Slot		auze Wrappe	a ⊓ T	orah Cut		illad Holos		Other (Specify)			
		Key Punc						one (Open H			•••••		
										ft., From	ft t	o ft	
										ft., From			
										ft. to		,	
		le contaminati		, 1 10111 .				, 1 10111					
Septic '			Lateral Line	es 🗆	Pit Privy		ПΙ	livestock Pe	ens	Insectici	de Storag	e	
			Cess Pool		Sewage L	agoon		Fuel Storage		Abandor			
	ight Sewer Li		Seepage Pit		Feedyard			Fertilizer Sto		🗌 Oil Well	/Gas Wel	1	
Other (Specify)								-				
	om well?				nce from v					ft.			
10 FROM	ТО		LITHOLO	GIC LOG		FRO	М	TO	LIT	HO. LOG (cont.) or l	PLUGGI	NG INTERVALS	
Notes:													
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 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.													
		eks.gov/waterwe		, ater, 00010g	₂ Section, 1	JUO D W Ja	CK3011 3	, Suite 420,	robe			SA 82a-1212	
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