	R WELL R			WWC-5			ision of Wate			Well ID		
Original Record Correction Change in Well Use  1 LOCATION OF WATER WELL: Fraction						Resources App. No. Section Number			Township Number Range Number			
1 LOCATION OF WATER WELL: Fraction County: Dickinson 4Sys					11/0	Se4 3/ T/2					ige Number 2 □ E □ W	
2 WEST	OWNER	Son	· 0000	75 W/13 W	(Aban)	most on Day						
County: Dickin Son  4 Stylb w 4 3 T/2 S R 2 E  2 WELL OWNER: Last Name: Stoffer First: Joson Business: 1904 Fwith Ave  Street or Rural Address where well is located (if unknown, distance a direction from nearest town or intersection): If at owner's address, check here												
Address:	withA	VE		cetion from hearest town of intersection). If at owner's address, effects here.								
Address	А			1000		2) A /	7) 4					
City:	451/01	P	State:	ZIP:6/4/6	,	<u> </u>	Petr	00	it		××	
3 LOCAT		4 DEPTI	HOF COM	IPLETED WELL	. 9	2 ft	5 Latit	ahu			(desimal degrees)	
	3 LOCATE WELL WITH "X" IN SECTION ROY. Depth(s) Groundwater Encountered: 1)						Long	5 Latitude:(decimal degrees)  Longitude:(decimal degrees)				
	SECTION BOX: Depth(s) Groundwater Encountered. 1) 3. 2											
<u> </u>				WATER LEVEL: ft.				Source for Latitude/Longitude:				
				, measured on (mo-			. По	GPS (unit make/model:				
NW	NE	☐ above	land surface	, measured on (mo-c	lay-yr)	1.7.2.5.7.1	3	(				
4		Pump test data: Well water was						☐ Land Survey ☐ Topographic Map				
W	E	after hours pumping				om						
SW	SE	afterhours pumping				m						
	l× I	Estimated Yield 5 2 gpm			5P	6 Elevation:			<b>1:</b> ft.	ft. 🗌 Ground Level 🔲 TOC		
	Ś	Estimated Yield 5			f	ft. and Source			e:   Land Survey   GPS   Topographic Map			
1	mile			in, to					Other			
7 WELL WATER TO BE USED AS:												
1. Domestic				ter Supply: well ID					eld Water Supply: 1e			
House		6. ☐ Dewatering: how many wells?						11. Test Hole: well ID				
1 2-	& Garden	7. Aquifer Recharge: well ID						☐ Cased ☐ Uncased ☐ Geotechnical				
Livest		8. Monitoring: well ID								how many bores?		
2. ☐ Irrigat 3. ☐ Feedle		9. Environmental Remediation: well II  ☐ Air Sparge ☐ Soil Vapor										
4. Indust			Recovery			iaction			(specify):			
						[7]eNTo						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter 5 in to 93 ft Diameter in to ft Diameter in to ft												
Casing height above land surface in. Weight S.D.R. 26. Ibs./ft. Wall thickness or gauge No. 2/5												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)												
☐ Brass		anized Steel	☐ Conc		ne usec	d (open hole	e)					
	OR PERFOR											
	inuous Slot	☐ Mill Slot	$\sqcup \sqcup G$	auze Wrapped	Torcl	n Cut 🔲 D	Prilled Holes	Ţ	Other (Specify)			
COPERN	ered Shutter	∐ Key Pun	ched   W	ire Wrapped	Daw (	Cut ∐ N	lone (Open F	Hole)	ft., From ft., From	0	0	
SCREEN-	PEKFUKATI	ED INTEDA	ALS: From	1	20 20	π., From .	ι π. υ	0	π., From	π. το	π.	
0 CDOU	TMATEDIA	I D Noot	ALS. FIOI	Company analyt	G	n., From .	Il. l		u., From	II. to		
Grout Inter	1 MALEKIA vale: Erom	AL: INear	cement _	f From	r Benu A	onite LIC	nner ft Erom		ft. to	 А	• • • • • • • • • • • • • • • • • • • •	
	urce of possibl			, 1 10111	11.	10	11., 1 10111	••••		IL.		
☐ Septic			Lateral Line	es 🔲 Pit Priv	У		Livestock Pe	ens	☐ Insection	ide Storage	;	
☐ Sewer			☐ Cess Pool     Sewage Lag						☐ Abandoned Water Well			
	☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
Other	(Specify)	·	• • • • • • • • • • • • • • • • • • • •			. 1110	,					
		( <i>y</i>	Immoro	Distance from	n well'				ft.	DITIOGE	C DIPPOSTAT ~	
10 FROM	TO	1011	LITHOLO			FROM	ТО	LII	THO. LOG (cont.) or	PLUGGIN	GINTERVALS	
10	132	75110	4 66	<u> </u>								
42	10.2	ned 3	nare	*				-			MAN AND SEAL	
0100	101	0	1.1									
C*0	0~1	Some	Wate						···			
01	139	Red 1	Pact	***************************************	-					······································		
TE	72	1361	JUCA			Notes:						
	Notes:											
	+											
11 CONT	FRACTOR'S	OR LAND	OWNER'	S CERTIFICATI	ON:	This water	r well was I	D	onstructed,  reco	nstructed	or nlugged	
under my	jurisdiction a	nd was com	pleted on (r	no-day-year)	13.	13 and	this record	is tr	ue to the best of m	y knowled	ge and belief.	
Kansas W	ater Well Cor	tractor's Li	cense No	./ This	Wate	r Well Rec	cord was co	mple	eted on (mo-day-ye	ear) ./	311.3	
under the business name of BOOKhUS. Dillius.												
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

Visit us at http://www.kdheks.gov/waterwell/index.html