

W			<b>RECORD</b>		WWC-5 1074			ion of Wate			Well ID		
1		Original Record         Correction         Change in Well Use           LOCATION OF WATER WELL:         Fraction						Resources App. No. Section Number Township Numb				ge Number	
1	County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$						$\begin{array}{c c} T & S \\ T & S \\ R & \Box E \Box W \end{array}$						
2	WELL Business: Address: Address:	OWNER:		State:			treet or Rural Address where well is located (if unknown, distance and irection from nearest town or intersection): If at owner's address, check here:						
3	City: LOCAT	FWFII		State:	ZIP:								
5	WITH "			IPLETED WELL: .									
	SECTIO N		2) WELL'S ST	ATIC WA	TER LEVEL:	ft., or 4) 🗌 Dry Well EL: ft.			Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:				
w	X	NE	D above la Pump test da	<ul> <li>below land surface, measured on (mo-day-yr).</li> <li>above land surface, measured on (mo-day-yr).</li> <li>Pump test data: Well water was ft. after hours pumping gpn Well water was ft.</li> </ul>				□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No) □ Land Survey □ Topographic Map □ Online Mapper:					
	SW		Estimated Y	after hours pumping					6 Elevation:ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map				
	-	S Bore Hole Diameter: in. to in. to											
7	WELL WATER TO BE USED AS:												
1. 2. 3.	Domestic: Housel Lawn & Livesto Irrigati Feedlo	mestic:       5. <ul> <li>Public Water Supply: well ID</li> <li>Household</li> <li>C</li> <li>Dewatering: how many wells?</li> <li>Aquifer Recharge: well ID</li> <li>Itivestock</li> <li>C</li> <li>Monitoring: well ID</li> <li>Feedlot</li> </ul> <li>Soil Vapor Extended</li>						<ul> <li>10. □ Oil Field Water Supply: lease</li> <li>11. Test Hole: well ID</li> <li>□ Cased □ Uncased □ Geotechnical</li> <li>12. Geothermal: how many bores?</li> <li>a) Closed Loop □ Horizontal □ Vertical</li> <li>b) Open Loop □ Surface Discharge □ Inj. of Water</li> <li>13. □ Other (specify):</li> </ul>					
	Was a chemical/bacteriological sample submitted to KDHE? $\Box$ Yes $\Box$ No If yes, date sample was submitted:												
					C 🗆 Other	C/	ASIN	G JOINTS	S: 🗆	Glued  Clamped		□ Threaded	
Ca Ca T	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       in. to       in. to       ft.       Wall thickness or gauge No.         TYPE OF SCREEN OR PERFORATION MATERIAL:												
SC	□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From												
_					n ft. to								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
			ole contaminati										
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         Other (Specify)       Other (Specify)       Sewage Lagoon       Sevage Lagoon       Sevage Lagoon       Sevage Lagoon													
					Distance from we					ft.			
10	FROM	TO	I	ITHOLOG	GIC LOG	FROM	M	TO	LIT	HO. LOG (cont.) or F	PLUGGIN	G INTERVALS	
						-							
						+							
						1							
			Notes	Notes:									
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)													
	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.												
	-		and Environment		vater, Geology Section, 10	UU S W Jac	KSON SI	t., Suite 420,	Tope	eka, Kansas 66612-1367.		A 82a-1212	