WATER WELL R		Form WW		Div	ision of Water			
	Correction Change in Well Use			Resources App. No.		T======	Well ID	
1 LOCATION OF WATER WELL: Fraction					ction Number   Township Number   Range Number			
County: Chase SE'NN' 5E'NW' 36 19T S R9 DE   2 WELL OWNER: Last Name Street or Rural Address where well is located (if unknown, distance and								
2 WELL OWNER: Last Name: Cowley First: Cody Street or Rural Address where well is located (if unknown, distance and direction from nearest Jown or intersection): If at owner's address, check here:								
Address: 2 mik S. (2 mik east of Intersection								
Address: City: 5affordulle State: KS ZIP: (6845) 8 of 200+1 2 YY rd.								
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 50						· · · · · · · · · · · · · · · · · · ·	<u> </u>	
WITH "X" IN	Double Groundwater Engagneered 1) 40 th							
SECTION BOX:	2)				Longitu	Longitude: W.96. 21.9(.6		
N			LEVEL: 25.		C C	Compared to the state of the st		
	below land surface, measured on (mo-daylyr). 9-5.17				<b>™</b> GPS	GPS (unit make/model: Gamy) AUV. I)		
NWNE	above land surface, measured on (mo-day-yr)					(WAAS chabled?   Yes   No)		
W E	Pump test data: Well water was					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:		
1 1 1 1 1		Well water was ft.				ne wiapper	•••••	
SW SE	after hours pumping gpm				6 Florestic	1303 A	<b>73</b> C	
S	Estimated Y	Estimated Yield:				6 Elevation:ft. ★ Ground Level ☐ TOC Source: ☐ Land Survey ★ GPS ☐ Topographic Map		
mile	Bole Hole D	in. to ft.						
7 WELL WATER TO BE USED AS:								
1. Domestic:			ipply: well ID		10. 🗌 Oil F	ield Water Supply: le	ease	
Household	6. Dewatering: how many wells?				11. Test Hole: well ID			
Lawn & Garden  Livestock	7. Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop  Horizontal  Vertical			
3. Feedlot		☐ Air Sparge ☐ Soil Vapor Extract			b) Open Loop Surface Discharge Inj. of Water			
4. Industrial Recovery Injection 13. Other (specify):								
Was a chemical/bacteriological sample submitted to KDHE?   Yes No If yes, date sample was submitted:								
Water well disinfected? X Yes □ No								
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to 50								
Casing diameter	in. 10	ia in Diar	neter	n. to	fl., Diamele	er in. to		
Casing height above land surface								
☐ Steel ☐ Stainless Steel ☐ Fiberglass    ☐ Other (Specify)								
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
☐ Continuous Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
SCREEN-PERFORATED INTERVALS: From								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Meat cement Cement Grout Mentonite Other								
Grout Intervals: From								
Nearest source of possible contamination:								
□ Septic Tank     □ Lateral Lines     □ Pit Privy     □ Livestock Pens     □ Insecticide Storage       □ Sewer Lines     □ Cess Pool     □ Sewage Lagoon     □ Fuel Storage     □ Abandoned Wafer Well								
☐ Waterlight Sewer Lines , ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
Direction from well? Not hiv 5								
Direction from well?								
0 4	Toosoi	ITHOLOGIC I		FROM .	TO LI	IHU. LUG (cont.) or	PLUGGING INTERVALS	
6 10	790301	shale	1001					
10 15	Cax 3	hale						
15 17	Chent	-						
17 40	5 hale							
40 41	Cher 1	-						
41 50	shale	<b></b>		Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Toonstructed. Treconstructed or Indusped								
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)								
Kansas Water Well Con	tractor's Lice	nse No	This Wat	er Well Rec	ord was compl	eted on kno-dona	1) 1 X /	
Mail 1 white copy alo	ng with a fee of	5.00 for each cons	ructed well to Kans	as Department	of Health and Fre	ring ment Bureau of We	ater GWTS Section	
Mail 1 white copy along with a fee of \$5.00 for each constructed well to Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.								
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015								