

	_	RECORD		WWC-5	,	5460		sion of Wate			XX / 11 TT			
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction						Resources App. No.			Well ID Township Number Range Number					
$\begin{array}{c c} 1 & \text{LOCATION OF WATER WELL:} \\ \hline \\ County: & 1/4 & 1/4 & 1/4 \end{array}$						4 ¹ /4								
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown														
Business:									irection from nearest town or intersection): If at owner's address, check here:					
Address:	Address: Address:													
City: State: ZIP:														
3 LOCATE WELL														
	WITH "X" IN 4 DEPTH OF COMPLETED WELL:													
	SECTION BOX: Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) \Box													
I I	N 22									WGS 84 INAE Latitude/Longitude:		NAD 27		
			below land surface, measured on (mo-day-yr							unit make/model:)		
NW	NE		above land surface, measured on (mo-day-yr)						C	WAAS enabled?	Yes] No)		
		-	Pump test data: Well water was ft.							Survey 🔲 Topogra				
W	E	after	after hours pumping gr Well water was ft.)nlin	e Mapper:				
SW	SE	after	after hours pumping											
			Estimated Yield:gpm					6 Elevation:ft. Ground Level						
	S	Bore Hole I	Bore Hole Diameter: in. to							□ Land Survey □ GPS □ Topographic Map				
1 r			in. to				t.							
7 WELL WATER TO BE USED AS:														
1. Domestic:														
	Household 6. Dewatering: how many wells? Lawn & Garden 7. Aquifer Recharge: well ID									\square Uncased \square C				
	Livestock 8. [] Monitoring: well ID									al: how many bores				
2. 🗍 Irrigati	Ξ ε									Loop 🗌 Horizonta				
3. 🗌 Feedlo			Air Sparg		Soil Vapor	Extraction	1			Loop 🗌 Surface Dis				
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? 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 in. to ft.														
	Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No													
	TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Fiberglass PVC Other (Specify)													
SCREEN C	SCREEN OR PERFORATION OPENINGS ARE:													
	nuous Slot	☐ Mill Slot		auze Wrap						Other (Specify)				
		Key Puncl									c			
										ft., From				
										ft., From				
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other														
		ole contaminati												
Septic 2			Lateral Line	es [Pit Privy			Livestock Pe		Insectic				
Sewer]			Cess Pool		Sewage L	agoon		Fuel Storage		Abando				
	ight Sewer L	ines 🗆 S	Seepage Pit	L	Feedyard			Fertilizer Sto	orage	🗌 Oil Wel	I/Gas We	211		
Other (Specify) Direction from well? ft.														
10 FROM	ТО		ITHOLO			FRO				HO. LOG (cont.) or		ING INTERVALS		
						Notes								
						1000	•							
										onstructed, 🗌 reco				
under my ju	urisdiction a	and was compl	leted on (n	no-day-ye	ar)		and th	his record i	is tru	e to the best of my	y knowle	edge and belief.		
Kansas Water Well Contractor's License No														
under the business name of														
KS Departr	nent of Health	and Environment	, Bureau of V	Water, Geolo	ogy Section, 1	000 SW Jac	kson S	St., Suite 420,	Торе	eka, Kansas 66612-136	7. Teleph	one 785-296-3565.		
Visit us at h	<u>ttp://www.kdł</u>	eks.gov/waterwel	l/index.html]	KSA 82a-1212		