

W	_	-	<b>RECORD</b>	-	W W C-3			ion of Wate			Well ID		
1		Original RecordCorrectionChange in Well UseLOCATION OF WATER WELL:Fraction					Resources App. No. Section Number			Township Number Range Number			
-	County:				1/4 1/4 1/4					T S	R	$\Box E \Box W$	
2	WELL Business: Address: Address: City:	OWNER:		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	LOCAT	E WELL		ZIP:		C.							
-	WITH "	X" IN	 fi	ft.	5 Latitude:								
W	SECTIO N NW	N NE     E	2) WELL'S ST below la above la Pump test da after	Depth(s) Groundwater Encountered: 1)         2)         2)         (a)         (b)         (c)         (c) <td colspan="4">Longitude:      </td>				Longitude:					
	<b>X</b>	Estimated Yield:						<b>6 Elevation</b> :ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map					
	-				in. to ft. and in to ft			☐ Other					
	1 mile												
1. 2. 3.	Domestic: Housel Lawn d Livesto Irrigati Feedlo Industr	nold & Garden ock on t	5 6 7 8 9. Er	5. □ Public Water Supply: well ID         6. □ Dewatering: how many wells?         7. □ Aquifer Recharge: well ID         8. □ Monitoring: well ID         9. Environmental Remediation: well ID         □ Air Sparge □ Soil Vapor Ext         □ Recovery □ Injection				<ul> <li>10. Oil Field Water Supply: lease</li> <li>11. Test Hole: well ID</li> <li>Cased Ducased 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?       Yes       No       If yes, date sample was submitted:												
	Water well disinfected? Yes No												
					C 🗆 Other	CA	SING	<b>G JOINTS</b>	S: 🗆	Glued  Clamped		I □ Threaded	
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. to       in. Weight       lbs./ft.       Wall thickness or gauge No.       ft.         Casing height above land surface       in.       Weight       lbs./ft.       Wall thickness or gauge No.       ft.         TYPE OF SCREEN OR PERFORATION MATERIAL:													
0													
9 GROUT MATERIAL:       Neat cement       Cement grout       Bentonite       Other       Other         Grout Intervals:       From       ft. to       ft. from       ft. to       ft. to         Nearest source of possible contamination:       Septic Tank       Lateral Lines       Pit Privy       Livestock Pens       Insecticide Storage         Sewer Lines       Cess Pool       Sewage Lagoon       Fuel Storage       Abandoned Water Well													
					Feedyard		∐ Fe	ertilizer Sto	orage	🗌 Oil Wel	I/Gas Well		
					Distance from w					ft.			
	FROM	ТО		ITHOLOG		FROM		ТО		HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
							-+						
			<u> </u>				-+						
							-+						
						Notes:	<b>i</b>						
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)													
	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.												
	Visit us at <u>h</u>	ttp://www.kdl	heks.gov/waterwell	l/index.html							KS	A 82a-1212	