

M	_		RECORD		WWC-5 1074			ion of Wate					
			Correction				sources App. No.			Well ID			
I	LOCATION OF WATER WELL: County:				FractionSec $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$			ion NumberTownship NumberRange NumberTSR \Box E \Box W					
2		OWNER: 1	ast Name		First:	-	Street or Rural Address where well is located (if						
4	Business:	OWNER. I	Last Maine.		Filst.		from nearest town or intersection): If at owner's address, check here:						
	Address:					uncetion n	omne		i inter	section). If at o wher	s address,		
	Address:			G	710								
2	City:		1	State:	ZIP:								
3	LOCAT				IPLETED WELL: ft.			5 Latitude :					
	SECTIO				Encountered: 1)			Long	itud	e:		(decimal degrees)	
	N				3) ft., or 4) [1		Datum: 🗌 WGS 84 🔲 NAD 83 🗌 NAD 27				
		X		WELL'S STATIC WATER LEVEL: ft. below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.						Latitude/Longitude:		、 、	
	NW								□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No) □ Land Survey □ Topographic Map				
	IN W	NE											
W		E	after hours pumping gpm Well water was ft.							e Mapper:			
	SW	SE											
	1			after hours pumping gpm Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC				
		 S			gpm in. to	ft and		Source: Land Survey GPS Topographic Mat					
	1 n		Dore Hole D		in. to ft.								
7 WELL WATER TO BE USED AS:													
1.	Domestic:		5. 🗖	Public Wa	ter Supply: well ID		10. 🗌 Oil Field Water Supply: lease						
					g: how many wells?			11. Test Hole: well ID					
	🗌 Lawn &				echarge: well ID								
	Livesto				g: well IDal Remediation: well II				al: how many bores				
	☐ Feedlo				a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water								
	Industr			Recovery	Injection								
W	Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
			? □Yes □]	-	_			.		1			
8	TYPE O	F CASING	USED: 🗆 St	teel 🗌 PV	C 🗌 Other	CA	SIN	G JOINTS	S: 🗆	Glued Clamped	U Welded	1 🗌 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												
T	TYPE OF SCREEN OR PERFORATION MATERIAL:												
	Steel Stainless Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:													
	□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)												
	Louve	red Shutter	🗌 Key Punch	ed 🗌 W	'ire Wrapped 🛛 Sa	w Cut] No	ne (Open H	Hole)				
SC					1 ft. to								
					n ft. to								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
			II. to le contaminatio		п., From	II. to		n., From	•••••	It. to	п.		
	Septic '			ateral Line	s 🗌 Pit Privy		$\Box L$	ivestock Pe	ens	☐ Insectic	ide Storage		
	Sewer I			Cess Pool	Sewage La	igoon		uel Storage		🗌 Abando			
		ght Sewer Li					🗆 F	ertilizer Sto	orage	🗌 Oil Wel	ll/Gas Well		
					Di-t					6 .			
	FROM	TO		ITHOLO	Distance from w	FROM		ТО		HO. LOG (cont.) or		GINTERVALS	
10	TROM	10	L	molo		TROM		10			Leoon	O IIVILK VILD	
							\square						
						NT - 4							
	Notes:												
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) and this record is true to the best of my knowledge and belief.													
Kansas Water Well Contractor's License No													
under the business name of													
]	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.												
	-		eks.gov/waterwell		'							A 82a-1212	