

WATER W				••••C-3	1320			sion of Wate					
Original Record Correction Change     I LOCATION OF WATER WELL:				ge in Well Use	1	Resources		-		ber Range Number			
County:				Fraction $\frac{1}{4}$ $\frac{1}{4}$	4 1/4	Section Number		er	Township Number T S		$\Box E \Box W$		
							$\frac{14}{4}$ TSREWtreet or Rural Address where well is located (if unknown, distance and						
							irection from nearest town or intersection): If at owner's address, check here:						
Address:								,		·			
Address: City:		State:	ZIP:										
3 LOCATE W	/FLL												
WITH "X"	APLETED WI			ft.									
SECTION H	Encountered: 1)				Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27								
N			2) ft. 3) ft., or 4) □ I ELL'S STATIC WATER LEVEL:				11					NAD 27	
	TX	below land surface, measured on (mo-day-yr								Latitude/Longitude: unit make/model:		)	
NW 1	NE	above land surface, measured on (mo-day-yr								WAAS enabled?			
	-	Pump test data: Well water was ft. after hours pumping					ΠL		Survey 🔲 Topogra				
W	E	after		Online Mapper:									
SW	SE	after	ft.										
		after hours pumping				. spin	6 Elevation:ft. Ground Level			nd Level 🔲 TOC			
S		Bore Hole Diameter: in. to				and <u>Source</u> : Land Survey GPS Topogr							
1 mile-	1		in. to				t. 🗌 Other					· · · · · · · · · · · · · · · · · · ·	
7 WELL WATER TO BE USED AS:													
1. Domestic:       5.          Public Water Supply: well ID          Household       6.          Dewatering: how many wells?													
							11. Test Hole: well ID						
2. Irrigation													
3. 🗌 Feedlot													
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 dis													
										Glued Clamped			
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.													
					•••••	lbs.	/ft.	Wall thick	kness	or gauge No			
TYPE OF SCF					DVC				hor (S	(nacify)			
SCREEN OR PERFORATION OPENINGS ARE:													
Continuou	is Slot	☐ Mill Slot	🗆 G	auze Wrapped	□ T	orch Cut [	Dri	illed Holes		Other (Specify)			
										ft., From			
										ft., From			
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
Nearest source					•••••	. 11. 10	•••••	, 110111			It.		
Septic Tan			ateral Line	es 🗌 Pit I	Privy		ΠL	livestock Pe	ens	☐ Insectic	ide Storag	ge	
Sewer Line			Cess Pool		age La	agoon		Fuel Storage					
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well													
☐ Other (Specify) Direction from well? ft.													
10 FROM	TO			GIC LOG	nom Ø	FRON				HO. LOG (cont.) or		NGINTERVALS	
	10		1111020			- Intoin	-	10	211		120001		
<b> </b>													
├	Notes:												
11 CONTRA	CTOR'S	OR LAND	WNER'	S CERTIFICA		N: This w	vater	well was [		Instructed Treco	nstructed	or nlugged	
under my juris	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 Contractor's License No This Water Well Record was completed on (mo-day-year)													
under the business name of													
KS Department	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed 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 http://								.,	- °PC			SA 82a-1212	