WATER WELL RI		Form WWC			sion of Water		Vell ID		
Original Record	~~~~~~~	Change in Wel	```	Soot	irces App. No. ion Number	Township Number	Range Number		
1 LOCATION OF WA		: Fraction	Nw New			T 33 S	R 2 DE W		
2 WELL OWNER: La	st Name:	First	S	treet or Rur	al Address wh	ere well is located (if i			
Business:	IPS	Mari	1en 1			ersection): If at owner's a			
Address: 11400	F 600		101	41	$r \sim r$	11			
WELL OWNER: Last Name:  Business: Address: Address: City:  WELL OWNER: Last Name:  First:  Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:  WELL OWNER: Last Name:  Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:  WELL OWNER: Last Name:  Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:									
3 LOCATE WELL		OF COMPLET	ED WELL.	60 a		•	(decimal decreas)		
WITH "X" IN		undwater Encount				d <b>e</b> :	1		
SECTION BOX: N	2)	it. 3)	ft or <b>4</b> ) <b>5</b>	Dry Well	Horizont	al Datum: □ WGS 84 □	□ NAD 83 □ NAD 27		
	WELL'S STATIC WATER LEVEL: ft. Source for Latitude/Longitude:								
	below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr					GPS (unit make/model:)			
NW NE	Pump test data: Well water was			1)[	(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
w E		hours pumpir		pm		ne Mapper:			
'   '			s ft.			пе таррет			
SW SE	after	hours numpir	ngg	pm	6 Florestic	n:ft. 🗆	Ground Level D TOC		
S	Estimated Yi	eld:gpm	60	Δ1		Land Survey GPS			
 	Bore Hole D	iameter: . Ggpm	in. toin. to	n. and		Other			
7 WELL WATER TO BE USED AS:									
1. Domestic:		Public Water Supp	oly: well ID		10. 🔲 Oil F	ield Water Supply: lease			
☐ Household		Dewatering: how				e: well ID			
Lawn & Garden		Aquiter Recharge:				d □ Uncased □ Geo mal: how many bores?			
Livestock  2. Irrigation		Monitoring: well vironmental Reme				ed Loop   Horizontal			
3. Feedlot			Soil Vapor Ex			Loop  Surface Disch			
4. 🔲 Industrial			☐ Injection			r (specify):			
Was a chemical/bacteriological sample submitted to KDHE?  Yes  No If yes, date sample was submitted:									
Water well disinfected?  Yes \( \subseteq \text{No} \)									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
Casing diameter									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
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)									
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From . 30. ft. to									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination:									
Septic Tank	_	ateral Lines	☐ Pit Privy	_	Livestock Pens				
☐ Sewer Lines ☐ Watertight Sewer Lin	_	'ess Pool eepage Pit	✓ Sewage Lag  ☐ Feedyard		Fuel Storage Fertilizer Stora	☐ Abandone ge ☐ Oil Well/C			
Other (Specify)	<b>1</b>			^ _	r eranzer stora,		Jus Well		
Direction from well?	<b>W</b>	I		11? 200		ft.			
10 FROM TO	L	ITHOLOGIC LO	OG	FROM	TO L	THO. LOG (cont.) or PI	LUGGING INTERVALS		
10 10	419X	112/1/21	10/010	, <b>, ,</b> ,	ne Ston				
120 36	Bay	GILLA	SMITE	V PIN	165100				
17: 277	Crum	Shale	hala.	Wa	+26				
47 60	Carav	Shale	Harc	, wa		44-484000000000000000000000000000000000	y y y y y y y y y y y y y y y y y y y		
	G-1 y	SIMIL	11000						
				Notes:	I.				
AL CONTROL CTORES OF AND ON AND DESCRIPTION OF THE CONTROL OF THE									
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									
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of									
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, GW1S 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.									
							e 785-296-5524. <b>Revised 7/10/2015</b>		
Visit us at http://www.kdhek:	s.gov/waterwell/i	ngex.mmi		KSA 82a-12	. 1 4		ALL 1 13 CU // 10/4013		

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