

	WELL R		WWC-5 1252	D	ivision of Wate			
Original Record Correction Change     I LOCATION OF WATER WELL:						rces App. No. Well ID Well ID On Number Township Number Range Number		
County:				Section Number			$\begin{array}{c} \text{R} \\ \text{R} \\ \text{E} \\ \text{W} \end{array}$	
2 WELL OWNER: Last Name: First: Street 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 WELL								
WITH "X" IN 4 DEPTH OF COM			IPLETED WELL: .			5 Latitude:(decimal degrees)		
	SECTION BOX: Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4)							
I I	J		$TER LEVEL: \dots$			Source for Latitude/Longitude:		
		below land surface			GPS (unit make/model:)			
NW	NE	$\Box$ above land surface, measured on (mo-day-yr).				(WAAS enabled? ☐ Yes ☐ No)		
		-	Pump test data: Well water was ft.			□ Land Survey □ Topographic Map		
W E		after hours pumping gpm Well water was ft.				Online Mapper:		
SW	SE	after hours pumping						
		Estimated Yield:	SPIII	6 Elevation:ft.  Ground Level  TOC				
	S	Bore Hole Diameter:	ft. and	Source:  Land Survey  GPS  Topographic Map				
1 n	1		in. to ft.			☐ Other		
7 WELL WATER TO BE USED AS:								
1. Domestic:			5. Deputition Public Water Supply: well ID					
☐ Housel			. Dewatering: how many wells?			11. Test Hole: well ID □ Cased □ Uncased □ Geotechnical		
	Livestock 8. Monitoring: well ID							
2. 🗌 Irrigati								
3. 🗌 Feedlot 🗌 Air Sparge				Extraction		b) Open Loop 🗌 Surface Discharge 📋 Inj. of Water		
4. 🗌 Industr	ial	Recovery	□ Injection		13. 🗌 O	ther (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 ft.								
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No								
□ 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)								
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. or ft. to ft. from ft. to ft. or ft.								
Grout Intervals: From								
Nearest source of possible contamination:								
Septic '		🗌 Lateral Line			Livestock Pe		cide Storage	
		Cess Pool	Sewage Lag	goon [	Fuel Storage	Aband	oned Water Well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)								
Direction from well? ft.								
10 FROM	TO	LITHOLO		FROM			r PLUGGING INTERVALS	
				Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged								
under my ju	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							
	usiness naine	Send one copy to WATER W	/ELL OWNER and retain of	one for vour re	cords. Fee of \$	5.00 for each constructed w	ell.	
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://www.kdheks.gov/waterwell/index.html KSA 82a-1212								