

M	_		RECOR	-	· · · · · · · · · · · · · · · · · · ·	0176		ion of Wate					
	Original Record Corr Corr LOCATION OF WATE				e in Well Use		Resou		1		Well ID		
1		WATER	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	· 1/				Township NumberRange NumberTSR \Box EW					
-	County												
2							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	LOCAT	E WELL	4 DE				C.						
		4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)											
	SECTIO) ft.					e: WGS 84 □ NAD				
	N	WELL'S STATIC WATER LEVEL:						ll Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:					
				, measured on (mo-day					unit make/model:)		
	$X_{1}^{NW} - NE - $ $X_{1}^{NW} - NE - $ Pump test data: Well water was							(WAAS enabled? ☐ Yes ☐ No)					
	^		-	Pump test data: Well water was ft.					□ Land Survey □ Topographic Map				
W			E at	after hours pumping gpm Well water was ft.					Online	e Mapper:			
	SW	SE	at		s pumping								
				Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC					
	-	5	Bore H	Bore Hole Diameter: in. to ft. and					Source: \Box Land Survey \Box GPS \Box Topographic Map				
	1 n	1			in. to	in. to ft.			☐ Other				
	7 WELL WATER TO BE USED AS:												
	Domestic: 5. □ Public Water Supply: well ID □ Household 6. □ Dewatering: how many wells?												
	□ Housel			7. Aquifer Recharge: well ID				\Box Cased \Box Uncased \Box Geotechnical					
	_	Livestock 8. Monitoring: well ID											
	Irrigation 9. Environmental Remediation: well ID							a) Closed Loop 🔲 Horizontal 🔲 Vertical					
	Feedlo			Air Sparge Soil Vapor Extr				b) Open Loop 🗌 Surface Discharge 🔲 Inj. of					
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 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 in. to ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
	TYPE OF SCREEN OR PERFORATION MATERIAL:												
-	□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)												
	Brass Galvanized Steel Concrete tile None used (open hole)												
SC				OPENINGS A			_		_				
		uous Slot	□ Mill							Other (Specify)			
50					Vire Wrapped Sa						ft to	ft	
50	SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. or ft. to ft. ft. to ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft.												
9					Cement grout Be								
					ft., From								
		-	ible contan										
				Lateral Line				ivestock Pe					
	Sewer I	ght Sewer	Lines	□ Cess Pool □ Seepage Pit	☐ Sewage La ☐ Feedyard	igoon		uel Storage ertilizer Sto		☐ Abandon ☐ Oil Well/		well	
								crunzer Sto	ладе		Jas well		
					Distance from w								
10	FROM	TO		LITHOLOG	GIC LOG	FRO	М	TO	LIT	HO. LOG (cont.) or P	PLUGGIN	G INTERVALS	
						_							
						-							
						Notes	5:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged													
un V	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													
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.													
	-				Vater, Geology Section, 10	000 SW Jac	ckson St	t., Suite 420,	Tope	ka, Kansas 66612-1367.	-		
	Visit us at <mark>h</mark>	<u>ttp://www.k</u>	dheks.gov/wa	terwell/index.html							KS	SA 82a-1212	