

M	_		RECORD		W W C-3			ion of Wate					
			Correction					Resources App. No. Section Number Township Num			Well ID		
I	LOCATION OF WATER WELL: County:				$\begin{array}{c c} \text{Fraction} & \text{Sect} \\ \hline 1/4 & 1/4 & 1/4 & 1/4 \end{array}$			1 0				$\Box E \Box W$	
2		OWNER: 1	ast Name:		First:				where well is located (if unknown, distance and				
4	Business:		Last Ivanie.		11150.		from nearest town or intersection): If at owner's address, check here:						
	Address:									,	,		
	Address: City:			State:	ZIP:								
3	LOCAT	E WELL											
J	WITH "					IPLETED WELL: ft Encountered: 1) ft.			5 Latitude:(decimal degrees)				
	SECTIO				Encountered: 1) 3) ft., or 4)		1						
	Ν	1			VEL: ft.			Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:					
			□ below la	 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)				
	NW	NE											
			Pump test data: Well water was ft. after hours pumping gpm Well water was ft.					□ Land Survey □ Topographic Map □ Online Mapper:					
W		E											
	sw	SE	after	after hours pumping									
			Estimated Y	ated Yield:gpm				6 Elevation:ft. Ground Level T					
					in. to ft. and			Source: Land Survey GPS Topographic Map Other					
Image:													
	7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease												
	□ Housel				ng: how many wells?			11. Test Hole: well ID					
	☐ Lawn & Garden 7. ☐ Aquifer R				echarge: well ID				ased	Uncased C	Geotechnica	1	
	Livesto				g: well ID			12. Geothermal: how many bores?					
	☐ Irrigati ☐ Feedlor			Air Sparge	al Remediation: well I e		a) Closed Loop [] Horizontal [] Vertical						
	Industr				b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify):								
	4. Industrial Recovery Injection 13. Other (specify): Was a chemical/bacteriological sample submitted to KDHE? Yes												
	Water well disinfected? Yes No												
					C 🗌 Other	CA	SIN	G JOINTS	S: 🗆	Glued Clamped	□ Welde	1 🗌 Threaded	
	8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter												
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
	□ Steel □ Fiberglass □ PVC □ Other (Specify) □ Brass □ Galvanized Steel □ Concrete tile □ None used (open hole)												
□ 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)												
						aw Cut [
SC					n ft. to								
0					n ft. to								
					Cement grout Be								
			le contaminatio					10, 110111					
	Septic 7			ateral Line				ivestock Pe		☐ Insectic	ide Storage		
	Sewer I			Cess Pool	Sewage La			uel Storage		Abando		Well	
		ght Sewer Li			☐ Feedyard		ΠF	ertilizer Sto	orage	🗌 Oil Wel	I/Gas Well		
					Distance from w					ft.			
	FROM	TO		ITHOLO		FROM		ТО		HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
							-+						
							_						
							-+						
						Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a 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 This Water Well Record was completed on (mo-day-year)													
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.													
	-				Vater, Geology Section, 1	000 SW Jack	son St	t., Suite 420,	Tope	ka, Kansas 66612-136'			
	v isit us at <u>h</u>	up://www.kdh	eks.gov/waterwell	/index.ntml							V.	A 82a-1212	