WATER WELL R		Form V				ision of Water	1		
Original Record	Correction	Change	in Well Use			urces App. No		Well ID	
1 LOCATION OF W	ATER WEI	L://_	Fraction	yW/S	E Sec	tion Number	Township Numb		
	ligeve					32	T 27 s	R / KE W	
2 WELL OWNER: Last Name: Street or Rural Address where well is located (if unknown, distance and									
Business: Address: 21370 with a direction from nearest town or intersection): If at owner's address, check here:									
	, -	U.S.	<i>(</i> 77	77	213	10	Wielel	ת ש	
Address: W.s.k	Vo	State:	ZIP: 672	<u> ハリー</u>			(
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL: 38									
WITH "X" IN			ncountered: 1)		3 ft.	Longit		(decimal degrees)	
SECTION BOX:	2) ft. 3) ft., or 4) □ Dry Well Datum: □ WGS 84 □ NAD 83								
	WELLSCOTATIC WATER LEVEL. / X 4								
	below land surface, measured on (mo-day-yr						S (unit make/model:)	
NW NE	above 1	above land surface, measured on (mo-day-y Pump test data: Well water was ft.			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
		after hours pumping							
W FE	anci	Well water was							
sw - L se	after hours pumping				gpm				
		Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC		
S	Boto Hoto Blantotor in to it and						ource:		
<u> </u>	i mile in. to It.								
7 WELL WATER TO BE USED AS:									
1. Domestic:	= 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						10. Oil Field Water Supply: lease		
Lawn & Garden						☐ Cased ☐ Uncased ☐ Geotechnical			
Livestock			: well ID				ermal: how many bore		
2. Irrigation	9. E	9. Environmental Remediation: well ID					a) Closed Loop		
3. Feedlot		Air Sparge		Vapor Ex	ctraction		b) Open Loop Surface Discharge Inj. of Water		
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: ☐S	Steel PVC	Other		CASII	NG JOINTS:	Glued 🗌 Clampe	d Welded Threaded	
Casing diameter									
Casing height above land surface									
Steel ☐ Stainless Steel ☐ Fiberglass ► PVC ☐ Other (Specify)									
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
☐ Continuous Slot									
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination: □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage									
Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well									
Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
Other (Specify)									
Direction from well?		<u> </u>		from wel	1?		fl		
10 FROM TO	——————————————————————————————————————	LITHOLOG	K JOG	\wedge	FROM	TO 1	LITHO, LOG (cont.) o	r PLUGGING INTERVALS	
0 5,	107	-	Ny .	- \	~//				
1/20	-	na	7	X					
71 33	Le) G		May.		ng				
					Notes:	<u> </u>			
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, if 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 becense No This Water Well Record was completed on (mo-day-year)									
under my jurisdiction and was completed on (mo-day-year)									
under the business nam	e of	ense No		ms wat	well Rec	ord was som		eary Z. T. (
						t fee of \$5.00 for a			
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas 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 Revised 9/10/2012									