

WATER WELL R		rm WWC-5	1317	7605		ion of Water				
		Change in Well Use				rces App. No		Well ID		
1 LOCATION OF WATER WELL: County:		Fraction	Fraction 1/4 1/4 1/4		Section Number		Township Numb	per Range Number R □ E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and										
						rection from nearest town or intersection): If at owner's address, check here:				
Address:										
Address:										
City: 3 LOCATE WELL										
WITH "X" IN			5 Latitud	łe:	(decimal degrees)					
SECTION BOX:	Depth(s) Groundwater Encountered: 1)					Longitude:(decimal degrees)				
N	2) ft. 3) ft., or 4) \(\subseteq \text{Discrete} \) WELL'S STATIC WATER LEVEL:				ell	Datum: WGS 84 NAD 83 NAD 27				
	below land surface, measured on (mo-day-yr)						for Latitude/Longitude			
NW NE	above land surface, measured on (mo-day-yr)					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)				
INW INE	Pump test data: Well water was ft.					☐ Land Survey ☐ Topographic Map				
W X E	after hours pumping gpm					Online Mapper:				
SW SE	Well water was ft.									
		after hours pumping gpn Estimated Yield:gpm				6 Elevation :ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to					Source:				
mile	in. to					Other				
7 WELL WATER TO BE USED AS:										
1. Domestic:	5. ☐ Public Water Supply: well ID					10. ☐ Oil Field Water Supply: lease				
☐ Household	6. Dewatering: how many wells?					11. Test Hole: well ID				
Lawn & Garden		7. Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical				
Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?				
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Ext					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. ☐ Industrial	Recovery Injection									
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify):										
Water well disinfected? \square Yes \square No										
8 TYPE OF CASING USED: Steel PVC Other										
Casing diameter										
Casing height above land surface in. Weightlbs./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) SCREEN OR PERFORATION OPENINGS ARE:										
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)										
SCREEN-PERFORATED INTERVALS: From ft., From ft., From ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.										
9 GROUT MATERIAL: Neat cement Dement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible ☐ Septic Tank		l Lines Dit	Dairer		Пτ	ivesta als Dan		aida Staraga		
Sewer Lines	□ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned						•			
☐ Watertight Sewer Lin										
Other (Specify)						ortinger Store	.g	an Gus VV GII		
Direction from well?							ft			
10 FROM TO	LITH	OLOGIC LOG		FRO	M	TO I	LITHO. LOG (cont.) or	r PLUGGING INTERVALS		
				Notes	<u> </u>					
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)										
Kansas Water Well Con	tractor's License	No	This W	ater Well	Keco	rd was com	pieted on (mo-day-y	ear)		
under the business name	Send one copy to WA	TER WELL OWNER at	nd retain	one for you	r record	ls. Fee of \$5.0	00 for each constructed we	ell.		
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed 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.										

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html