

M	_				· · · C-3	)113	DIV	ision of Wat			W-11 ID			
1	Original Record Correction Chang			e in Well Use Fraction			Resources App. No.		Township Number Rang		nge Number			
I	County:					1⁄4	1/4	uon numo	el	T S	R	$\Box E \Box W$		
2		OWNER: L	ast Name:		First:						well is located (if unknown, distance and			
_	Business:					direction from nearest town or intersection): If at owner's address, check here:								
	Address:													
	Address: City:			State:	ZIP:									
3	LOCAT	E WELL												
	WITH "				<b>IPLETED WELL</b> Encountered: 1)			5 Latitude:(decimal degrees)						
	SECTIO			ft.				Longitude:(decimal degrees) Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27						
	N	N	ATIC WA				Source for Latitude/Longitude:							
	l	<ul> <li>- NW NE</li> <li>X</li> <li>E</li> <li>below land surface, measured on (mo-day-y above land surface).</li> </ul>							GPS (unit make/model:)					
	NW								(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
w														
vv				vater was	ft.									
	SW	SE		after hours pumping gpm				6 Flow	6 Elevation:ft. Ground Level TOC					
		S Estimated Yield:gpm Bore Hole Diameter:in. to							Source:  Land Survey  GPS  Topographic Map					
					in. to		bour	Other						
7	7 WELL WATER TO BE USED AS:													
1.	Domestic:				ter Supply: well ID .									
	Housel				: how many wells?				11. Test Hole: well ID					
	□ Lawn ∂ □ Livesto				harge: well ID				$\Box$ Uncased $\Box$ G					
	□ Irrigati		vironmenta			<ul><li>12. Geothermal: how many bores?</li><li>a) Closed Loop □ Horizontal □ Vertical</li></ul>								
	Feedlo						b) C	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: 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	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)													
SC					1 ft. to						ft. to	ft.		
	G	RAVEL PA	CK INTERVA	ALS: Fron	n ft. to		ft., From .	ft. 1	to	ft., From	ft. to	o ft.		
					Cement grout									
					ft., From	ft. t	to	ft., From	1	ft. to	ft.			
	Septic '	-	e contaminati	on: Lateral Line	s 🗌 Pit Privy			Livestock P	ens	Insectici	ide Storage	<u>,</u>		
	Sewer I			Cess Pool	□ Sewage I			Fuel Storage						
	U Waterti	ght Sewer Li	nes 🗆 S	leepage Pit	Feedyard	l		Fertilizer St	orage	🗌 Oil Wel	l/Gas Well			
					Distance from					£.				
	FROM	TO		ITHOLO			FROM	ТО		HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
		N							Notes:					
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) and this record is true to the best of my knowledge and belief.														
Kansas Water Well Contractor's License No														
under the business name of														
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.												e 785-296-3565.		
	-		ks.gov/waterwell		, , , , ,				, P.	,	-	SA 82a-1212		