

W	_		RECORD		WWC-5 1097			ion of Wat					
1		Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction					Resources App. No. Section Number Township Num			Township Number	Well ID Ran	ge Number	
T	County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$						Seen	T S R \square E \square W					
2	WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance a direction from nearest town or intersection): If at owner's address, check her Address: Address: Address:											distance and	
3	City: LOCAT		State:	ZIP:									
5	WITH "			IPLETED WELL:		ft.							
	SECTIO	N BOX:	Depth(s) Gr			11	Longitude:						
W	N NW SW	NE	WELL'S ST below la above la Pump test d after	TATIC WA and surface, and surface, ata: Well w hours Well w	3) ft., or 4) TER LEVEL: , measured on (mo-day- , measured on (mo-day- vater was ft yater was ft yater was ft	ft. yr) yr) gpm t.	Datum: 🗌 WGS 84 📄 NAD 83 📄 NAD 27 <u>Source for Latitude/Longitude</u> : 📄 GPS (unit make/model:) (WAAS enabled? 🗌 Yes 📄 No) 📄 Land Survey 📄 Topographic Map 📄 Online Mapper:						
	5,,	s after hours pumping						6 Elevation:ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map					
	<u> </u>												
	1 n	-		in. to ft.									
7	WELL WATER TO BE USED AS:												
	Domestic:				ter Supply: well ID								
	☐ Housel ☐ Lawn &			g: how many wells? echarge: well ID									
	Livesto			g: well ID			12. Geothermal: how many bores?						
	🔲 Irrigati		nvironmenta			a) Closed Loop 🔲 Horizontal 🗌 Vertical							
	Feedlo			Air Sparge		Extraction		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:												
			$\frac{1?}{\Box}$ Yes \Box				CINI				337.11		
	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)												
50	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					n ft. to						ft. to	ft.	
	G	RAVEL PA	ACK INTERV	ALS: Fron	n ft. to	ft., Fro	om	ft. t		ft., From	ft. to	ft.	
					Cement grout 🛛 Ber								
					ft., From f	ft. to	•••••	ft., From	•••••	ft. to	ft.		
	Septic '	-	ble contaminati □ □	Lateral Line	s 🗌 Pit Privy		ΠĿ	ivestock Pe	ens	Insecticid	e Storage		
	Sewer I			Cess Pool	Sewage Lag	goon	🗆 Fi	uel Storage	e	Abandone		Well	
	U Waterti	ght Sewer I	Lines 🗆 S	Seepage Pit	Feedyard		🗆 Fe	ertilizer Sto	orage	e 🗌 Oil Well/	Gas Well		
	Other (Specify) Direction from well? ft.												
	FROM	TO		ITHOLOG		FROM		ТО	т	THO. LOG (cont.) or Pl	LUGGIN	GINTERVALS	
10	11(01)1	10	-			TROM		10	211		2000110	SHUERUES	
						Notes							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged													
un	der my ju	urisdiction	and was compl	eted on (n	no-day-year)		and th	is record	is tru	ue to the best of my l	cnowledg	ge and belief.	
Ka III	der the b	usiness nat	ne of	ense No	This Wa	ler well	Kecol	ru was co	mpie	eled on (mo-day-year)		
under the business name of													
					Vater, Geology Section, 10	00 SW Jacl	cson St	t., Suite 420,	, Tope	eka, Kansas 66612-1367.			
	Visit us at <u>h</u>	ttp://www.kd	heks.gov/waterwel	<u>I/index.html</u>							KS	A 82a-1212	