

		RECORD		WWC-5		5982		sion of Wate			Well ID			
			ge in Well U		Resources App. No									
1 LOCATION OF WATER WELL: County:				Fraction	4 ¹ / ₄	Section Number		er	Township NumberRTSR		unge Number $\Box \to \Box W$			
	county.							treet or Rural Address where well is located (if unknown, distance and						
									irection from nearest town or intersection): If at owner's address, check here:					
Address:												, eneek nere.		
Address:														
City: State: ZIP: 3 LOCATE WELL 4 DEPTH OF COMPLETED WELL 6 5 4 10 10 10 10 10 10 10 10 10 10 10 10 10														
S LOCAT WITH "	IPLETEI) WELL:		ft.	5 Latitude:(decimal degrees)									
	SECTION BOX: Depth(s) Groundwater					Encountered: 1) ft.				Longitude:(decimal degrees)				
1			2) ft. 3) ft., or 4) \Box I							WGS 84 🗌 NAI		NAD 27		
			WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day-yr)							Latitude/Longitude				
NW			above land surface, measured on (mo-day-yr)					∐ G.	☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)					
IN W	NE		Pump test data: Well water was ft.					Land Survey Topographic Map						
w	Е		after hours pumping gp							Mapper:				
SW	SE		Well water was ft.											
			after hours pumping gpm					6 Eleva	6 Elevation:ft. Ground Level TOC					
			ed Yield:gpm ble Diameter: in. to											
	1 mile			in.										
7 WELL WATER TO BE USED AS:														
1. Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease														
Household 6. Dewate										e: well ID				
	□ Lawn & Garden 7. □ Aquifer H							Cased Uncased Geotechnical						
	□ Livestock 8. □ Monitoring: well ID □ Irrigation 9. Environmental Remediation:								12. Geothermal: how many bores?					
					Soil Vapor Extraction			a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water						
4. Industr					13. □ Other (specify):									
4. Industrial Recovery Injection 13. Other (specify): Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:														
Was a chemical bacteriological sample submitted to \mathbf{KDHE} ? \Box is \Box is \Box in yes, date sample was submitted:														
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) SCREEN OR PERFORATION OPENINGS ARE:														
	nuous Slot	☐ Mill Slot		auze Wrapp	ned □T	orch Cut	□ Dr	illed Holes		Other (Specify)				
		☐ Key Punc	hed 🗌 W	/ire Wrappe	d □S			one (Open H		other (speeng)				
						ft., F	rom	ft. to		ft., From	ft. t	o ft.		
G	RAVEL PA	CK INTERV	ALS: From	n	ft. to	ft., F	rom	ft. to	o	ft., From	ft. t	o ft.		
				ft., From		. ft. to	•••••	ft., From		ft. to	ft.			
Nearest sou		le contaminati	i on: Lateral Line		Dit Driver		Пτ	Livestock Pe	20	Insection	ida Storad			
			Cess Pool] Sewage L	agoon		Fuel Storage						
] Pit Privy] Sewage L] Feedyard	agoon		Fertilizer Sto	rage					
		ines 🔲		• • • • • • • • • • • • • • •		• • • • • •			-					
	Direction from well? Distance from well?													
10 FROM	TO	I	LITHOLO	GIC LOG		FRC	M	TO	LIT	HO. LOG (cont.) or	PLUGGI	NG INTERVALS		
						Note	s:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged														
Kansas Wa	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 <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.														
					gy Section, 1	000 SW Ja	ckson S	St., Suite 420,	Tope	ka, Kansas 66612-136				
visit us at h	<u>up://www.kdh</u>	eks.gov/waterwei	u/maex.html								K	SA 82a-1212		