

| | | | RECORD | - | WWC-5 1259 | | | ion of Wat | | | | | |
|---|---|--------------------|---|--|----------------------------|--|------------|--|--|-----------------------------|-------------|-------------|--|
| | | ecord | | | | rces App. No. Well ID Well ID ON Number Township Number Range | | | ge Number | | | | |
| | unty: | | | 1/4 1/4 1/4 | | | | | $\begin{array}{c c} T & S \\ T & S \\ \end{array} \begin{array}{c} \text{Relation} \\ R & \Box E \\ \Box W \\ \end{array}$ | | | | |
| 2 WE Busi Addr Addr | WELL OWNER: Last Name: First: Business: Address: Address: First: | | | | | | | Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: | | | | | |
| City: | | VFLL. | | State: | ZIP: | | | | | | | | |
| | | | | | IPLETED WELL: . | | | 5 Latitude:(decimal degrees) | | | | | |
| SEC | TION | BOX: | | Encountered: 1) ft. | | | Longitude: | | | | | | |
| w | N W V | E | WELL'S ST below 1 above 1 Pump test d after | ft. yr) yr) gpm | | 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: | | | | | | | |
| | , | | | after hours pumping gp. | | | | 6 Elevation:ft. 🗆 Ground Level [| | | Level 🗆 TOC | | |
| | - X - | | | Estimated Yield:gpm Bore Hole Diameter:in. to | | | | Source: Land Survey GPS Topographic Map | | | | | |
| | 1 mile | ; | Doite Hole 1 | in. to | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | | |
| ☐ La ☐ Li 2. ☐ Irr 3. ☐ Fe | Household 6. Dewatering: how many wells? Lawn & Garden 7. Aquifer Recharge: well ID Livestock 8. Monitoring: well ID Irrigation 9. Environmental Remediation: well ID | | | | | | | 10. Oil Field Water Supply: lease 11. Test Hole: well ID Cased Ducased Geotechnical 12. Geothermal: how many bores? a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water 13. Other (specify): | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: | | | | | | | | | | | | | |
| | | | ? \Box Yes \Box | - | | | | ii 905, aac | e sui | | | | |
| 8 TYP | E OF | CASING | USED: 🗆 S | teel DV | C 🗌 Other | CA | SINC | G JOINTS | S: 🗆 | Glued Clamped | U Welded | Threaded | |
| 8 TYPE OF CASING USED: Disteel DVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter | | | | | | | | | | | | | |
| | I YPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Fiberglass □ PVC □ Other (Specify) | | | | | | | | | | | | |
| | □ Brass □ Galvanized Steel □ Concrete tile □ None used (open hole) | | | | | | | | | | | | |
| | SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | | |
| | | us Slot Shutter | ☐ Mill Slot | | | orch Cut [w Cut [| | | | Other (Specify) | ••••• | | |
| | | | | | 1 ft. to | | | | | | ft. to | ft. | |
| ~ | | | | | n ft. to | | | | | | | | |
| 9 GR(| | | | | Cement grout 🛛 Be | | | | | | | | |
| | | | | | ft., From | ft. to | | ft., From | ••••• | ft. to | ft. | | |
| | | - | le contaminati | on: Lateral Line | s 🗌 Pit Privy | | | ivestock Pe | 226 | 🗖 Insectiou | da Storaga | | |
| | ptic Tar wer Lin | | | | S I Fit Fit y Sewage La | | | uel Storage | | ☐ Insecticie ☐ Abandor | | Well | |
| 🗆 Wa | tertigh | t Sewer Li | nes 🗌 S | Seepage Pit | Feedyard | | | ertilizer Sto | | | | | |
| ☐ Other (Specify) Direction from well? ft. | | | | | | | | | | | | | |
| Directio 10 FRC | | TO TO | | ITHOLOG | | FROM | | ТО | | ft. HO. LOG (cont.) or I | DILICCIN | 2 INTEDVALS | |
| IU FKU | IVI | 10 | 1 | | HC LUG | FROM | 1 | 10 | LII | HO. LOG (cont.) of f | PLUGGIN | JINTERVALS | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | Notes: | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a 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 This Water Well Record was completed on (mo-day-year) 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. | | | | | | | | | | | | | |
| | | | and Environment eks.gov/waterwel | | valer, deology section, IC | JUU S W JACK | 5011 St | ., Suite 420, | , rope | ra, raiisas 00012-1307 | | A 82a-1212 | |