

W			RECORD		W W C-3	950 ⁻	DIV	ision of Wat			Well ID		
1		Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction					Resources App. No. Section Number T			Township Number Range Number			
1	County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$						1/4						
2	WELL OWNER: Last Name: First: S Business: d Address: d							Street or Rural Address where well is located (if unknown, distance and lirection from nearest town or intersection): If at owner's address, check here:					
3	City: LOCAT	F WFLL											
5		4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)							5 Latitude:(decimal degrees)				
	SECTIO								le:				
W	N NW - X	NE E	WELL'S ST below 1 above 1 Pump test d after	TATIC WA and surface and surface, ata: Well w hours Well w) ft., or 4) Dry Well ER LEVEL: ft. measured on (mo-day-yr) measured on (mo-day-yr) ater was ft. pumping gpm ater was ft. pumping gpm				Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:				
		Estimated Yield:gpm						6 Elevation:ft. Ground Level					
	-	S Bore Hole Diameter: in. to						Source: Land Survey GPS Topographic					
	7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease												
	☐ Household												
		Lawn & Garden 7. Aquifer Recharge: well ID								Uncased Ge			
	Livesto	Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?					
	🗌 Irrigati			al Remediation: well									
	Feedlot Air Sparge Soil Vapor E						action	b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water					
	4. Industrial Recovery Injection 13. Other (specify):												
	Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box 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 ft., Diameter ft., Diameter ft., Diameter ft., Diameter												
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:												
		nuous Slot red Shutter	☐ Mill Slot		auze Wrapped								
SC										ft., From	ft to	ft	
5.													
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. o ft. o ft. o ft. o ft. to ft. to ft. o ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft													
					ft., From	ft. to	o	ft., From	ı	ft. to	ft.		
			ole contaminati				_				1 0		
	□ Septic ' □ Sewer l			Lateral Line Cess Pool	es 🗌 Pit Privy 🗌 Sewage L	0000	, L	Livestock P Fuel Storage		☐ Insecticio ☐ Abandon		Wall	
					☐ Sewage I ☐ Feedyard	agoon		Fertilizer St	orage			wen	
	Other (Specify)							oruge		ous ii on		
					Distance from					ft.			
10	FROM	TO	I	ITHOLOG	GIC LOG]	FROM	TO	LIT	THO. LOG (cont.) or P	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.													
	-		and Environment neks.gov/waterwel		vater, Geology Section,	1000 S'	w Jackson	st., Suite 420	, Top	eka, Kansas 66612-1367.		A 82a-1212	