

	WELL R		-	•••••	36´			ion of Wate			W-11 II		
Original Record Correction Change 1 LOCATION OF WATER WELL:			e in Well Use Fraction		Resources App. N Section Number					Well ID Range Number			
County:					4 ¹ /4			-1	T S		$\begin{array}{c} \text{Range Number} \\ \text{R} \Box \text{ E} \Box \text{ W} \end{array}$		
2 WELL Business: Address: Address: City:	OWNER: L	First: ZIP:			treet or Rural Address where well is located (if unknown, distance ar rection from nearest town or intersection): If at owner's address, check here								
3 LOCATE WELL													
WITH "X" IN 4 DEPTH OF CON Depth(s) Groundwater							. ft.						
SECTIO N W NW W SW	NE E SE X	b)ft., or 4) Dry Well FER LEVEL:ft. measured on (mo-day-yr) measured on (mo-day-yr) ater wasft. pumping gpm ater wasft. pumping gpm 				Longitude:							
1 m				in. to	ft.	ft.] Other				
 Domestic: Househ Lawn & Livesto Dirrigatio Feedlot 	7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID □ Household 6. □ Dewatering: how many wells? □ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. □ Monitoring: well ID 2. □ Irrigation 9. Environmental Remediation: well II 3. □ Feedlot □ Air Sparge □ Soil Vapor 4. □ Industrial □ Recovery □ Injection						 	 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:												
	Was a chemical bacteriological sample submitted to KDHE? \Box Yes \Box No \Box 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. ft. TYPE OF SCREEN OR PERFORATION MATERIAL:													
										ft. to			
Grout Intervals: From ft., From ft. Nearest source of possible contamination:													
10 FROM	TO	L	THOLO	GIC LOG		FROM	[TO	LIT	HO. LOG (cont.) or	PLUGG	NG INTERVALS	
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 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. Visit us at <u>http://www.kdheks.gov/waterwell/index.html</u> KSA 82a-1212												