WATER WELL R		Form WWC			ision of Wate			
	Correction Change in Well Use			Resources App. No. Well ID				
1 LOCATION OF W	ATER WELI	L: Fract	ion	Sec	ction Numbe			
County: SAL	WE	8/21/	40W14SE 1/4		/7	T /4 s	$R \supset \Box E \boxtimes W$	
2 WELL OWNER: L	ast Name:パルト	ンKに First:	DAN				(if unknown, distance and	
Business: 619 PRAIRIE LANE direction from nearest town or intersection): If at owner's address, check here:								
Address: (a) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d								
City: SALINA State: 45 ZIP: 67401 COLY TEATER AME								
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: ft. 5 Latitude:								
WITH "X" IN	Denth(s) Gro	undwater Encoun	tered: 1)	۳ ک				
SECTION BOX:		ft. 3)						
N N	well's static water level:					for Latitude/Longitude		
	below land surface, measured on (mo-day-yr)						)	
NW NE	above land surface, measured on (mo-day-yr)				······ (WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map			
W	after					nline Mapper:		
SW SE	Well water was ft.  after hours pumping							
	Estimated Yi	eld:gpm	n .		6 Elevation:ft. Ground Level TOC			
S	Bore Hole Di	iameter:	. in. to?	. ft. and	Source:  Land Survey GPS Topographic Map			
1 mile	1 mile  in, to ft,							
7 WELL WATER TO BE USED AS:								
1. Domestic:		Public Water Sup					ease	
☐ Household  MacLawn & Garden		Dewatering: how Aquifer Recharge						
Livestock		Monitoring: well						
2. Irrigation		vironmental Reme						
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Ext				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:								
Water well disinfected?								
8 TYPE OF CASING USED: ☐ Şteel MPVC ☐ Other								
Casing diameter								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:  ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ VC ☐ Other (Specify)								
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
☐ Continuous Slot Mill Slot 1920 ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possible contamination:  ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage								
Sewer Lines		ess Pool	☐ Sewage Lag	_	Fuel Storage		oned Water Well	
Watertight Sewer Lir	nes 🔲 Se	eepage Pit	☐ Feedyard		Fertilizer Stor	rage 🔲 Oil We	ell/Gas Well	
Other (Specify)								
Direction from well?	NORTH	<u>1</u>	Distance from we	11?	ب			
10 FROM TO	LI	THOLOGIC LO	)G	FROM	TO	LITHO. LOG (cont.) o	PLUGGING INTERVALS	
	FILL DIE	17 10 04 54	<i>,</i>			WIFE-11 . W.T. I		
70 /		AD SILTY			<del></del>			
		NO W/ CPE	SILTY TAK EK GRADE	Ĭ	<u> </u>			
81	SHALL	ODAY	IK GLAVE					
	0711120	GCA)						
	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)								
Kansas Water Well Contractor's License No. 201 This Water Well Record was completed on (mo-day-year) 2.7								
under the business name	of PL.ST	LOGER	Pump 5	CAVICA		DA DA WO	L	
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas								
Department of He	alth and Environmen	nt, Bureau of Water, G	eology Section, 1000	SW Jackson St., S	Suite 420, Topeka	, Kansas 66612-1367, Teleph	one (785) 296-3565.	

KSA 82a-1212

Revised 9/10/2012

Visit us at http://www.kdheks.gov/waterwell/index.html