

W	_		RECORD		WWC-5 1220			ion of Wat			Well ID		
1	- 0	Original Record Correction Change in Well Use OCATION OF WATER WELL: Fraction					11			ge Number			
-	County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$						Secti	$\begin{array}{c c} T & S & R & \Box E \Box W \end{array}$					
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if u direction from nearest town or intersection): If at owner's a Address: Address: Address: City: State: ZIP:										,			
3	LOCAT	E WELL				ft. 5 Latitude :(decimal degrees)							
		4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)										-	
W	SECTION BOX: 2)							Longitude:					
		Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC					
	-	S ,	Bore Hole I			in. to ft. and			Source: Land Survey GPS Topographic Map				
	1 n				in. to		☐ Other						
1. 2. 3.	Domestic: Housel Lawn d Livesto Irrigati Feedlo	nold & Garden ock on t	FO BE USED AS: 5. □ Public Water Supply: well ID 6. □ Dewatering: how many wells? 7. □ Aquifer Recharge: well ID 8. □ Monitoring: well ID 9. Environmental Remediation: well ID □ Air Sparge □ Soil Vapor Extr □ Resource □ Resource □ 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 (croasify); 					
	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												
Ca Ca T S	Casing diameterin. toft., Diameterin. toft., Diameterin. toft. Casing height above land surfacein. Weight												
					n ft. to								
					Cement grout Be								
Grout Intervals: From													
	FROM	TO		ITHOLOG		FROM		ТО	LIT	HO. LOG (cont.) or P	LUGGIN	GINTERVALS	
					M [_]								
						-							
						+							
						Notes	 :						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, are plugged under my jurisdiction and was completed on (mo-day-year)													
under the business name of													
	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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212												