

W	_		RECORD		· · · C-3	8258		sion of Wate					
1	Original Record Correction Change Correction Ch							urces App. No. tion Number Township Numb			Well ID		
I	County:				1/4 $1/4$ $1/4$ $1/4$						$\Box E \Box W$		
2		OWNER: 1	ast Name:	First:	-	reet or Rural Address where well is located (if unknown, di							
-	Business:	0 111 220		1100		irection from nearest town or intersection): If at owner's address, check here:							
	Address:												
	Address: City:			State:	ZIP:								
3	LOCAT	E WELL											
-	WITH "	X" IN			IPLETED WELL: Encountered: 1) ft.				Latitude:				
	SECTIO					Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27							
	Ν	N		2) ft. 3) ft., or 4) □ Dry Well WELL'S STATIC WATER LEVEL: ft.					Source for Latitude/Longitude:				
	X			 □ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr) Pump test data: Well water was ft. after hours pumping gpm Well water was ft. 					□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No) □ Land Survey □ Topographic Map □ Online Mapper:				
	NW	NE											
***			~										
W		E	arter										
	SW	SE	after	after hours pumping gpm									
				Estimated Yield:gpm					6 Elevation:ft. □ Ground Level □ TOC <u>Source</u> : □ Land Survey □ GPS □ Topographic Map				
		S silo	Bore Hole I	Bore Hole Diameter: in. to				and \Box Other					
1 mile in. to ft. □ Other													
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease													
	House			6. Dewatering: how many wells?									
	🗌 Lawn a				echarge: well ID			Cased Uncased Geotechnical					
	Livesto		g: well ID				12. Geothermal: how many bores?						
	☐ Irrigati ☐ Feedlo			al Remediation: well I		a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water							
	Industr			☐ Air Sparge ☐ Soil Vapor Extr ☐ Recovery ☐ Injection				13. Other (specify):					
	Was a chemical/bacteriological sample submitted to KDHE? Yes 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	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													
T	TYPE OF SCREEN OR PERFORATION MATERIAL:												
Steel Stainless Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE:													
	□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)												
_					ire Wrapped S								
SC					1 ft. to								
0					$\mathbf{n} \dots \mathbf{n}$ ft. to \dots								
					Cement grout B								
			le contaminati										
	🗌 Septic '			Lateral Line				ivestock Pe		Insectici			
	Sewer l			Cess Pool	□ Sewage L			uel Storage		Abando		Well	
					☐ Feedyard			ertilizer Sto	orage	🗌 Oil Wel	I/Gas well		
					Distance from v					ft.			
10	FROM	TO	Ι	ITHOLO	GIC LOG	FRO	М	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
						Notes	5:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged													
un K	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 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 eks.gov/waterwel		vater, Geology Section, 1	UUU SW Jao	ckson S	t., Suite 420,	Tope	ка, Kansas 66612-1367		e 785-296-3565. SA 82a-1212	
	, ion us at 👖	<u>p.//www.Kull</u>	cho.gov/waterwel	I/ IIIUCA.IIUIII							17	11 020 ⁻ 1212	