

W	_		RECORD		WWC-5 1092			ion of Wate					
1	Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction						ces App. No.		Townshin Numbe	Well ID Range Number			
T	County			1/4 1/4 1/4					$\begin{bmatrix} T & S \\ T & S \end{bmatrix} R \square E \square W$				
2	í	OWNER:		First: ZIP:	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:								
3	LOCAT	E WELL		State:			-						
-	WITH "	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)						5 Latitude:					
w	SECTIO N NW SW	↓ NE ↓★ _E	2) WELL'S ST below la above la Pump test da after	2) ft. 3) ft., or 4) □ WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day-yr below land surface, measured on (mo-day-yr pump test data: Well water was ft. after hours pumping				Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude: GPS (unit make/model:) (WAAS enabled? Yes No) Land Survey Topographic Map Online Mapper:					
			Estimated Y	ield:				6 Elevation :ft. □ Ground Level □ TOC <u>Source</u> : □ Land Survey □ GPS □ Topographic Map					
		S aila	Bore Hole D	Bore Hole Diameter: in. to				$\square Other \dots$					
1 mile													
1. 2. 3.	Domestic: Housel Lawn & Livesto Irrigati Feedlo	omestic:5. □ Public Water Supply: well ID] Household6. □ Dewatering: how many wells?] Lawn & Garden7. □ Aquifer Recharge: well ID] Livestock8. □ Monitoring: well ID] Irrigation9. Environmental Remediation: well ID						 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? Yes No II yes, date sample was submitted:												
	8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Ca Ca TY SC	Casing diameterin. toft., Diameterin. toft., Diameterin. toft. Casing height above land surfacein. Weightlbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Fiberglass Brass Galvanized Steel Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole) SCREEN-PERFORATED INTERVALS: From												
					Cement grout Be								
					ft., From	ft. to	••••••	ft., From		ft. to	ft.		
Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well Other (Specify) Other (Specify) Sever Storage Storage Storage													
	FROM	TO		ITHOLOG	Distance from w	FRON				ft. HO. LOG (cont.) or		CINTEDVALS	
10	TROM	10	L			FRUN	v1	10		110. LOG (COIII.) OF	LUUUIIN	JINIERVALO	
						Notar							
	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)													
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.													
	-		eks.gov/waterwell		,,,,					, 00012 100		A 82a-1212	