

W	_		RECORD		· · · · · · · · · · · · · · · · · · ·	6292		sion of Wate			W-II ID		
1	Original Record Correction Change Correction Change COCATION OF WATER WELL:							irces App. N ion Numbe		Well ID Township Number Range Numb		nge Number	
1	County			11.								$\Box E \Box W$	
2	2	OWNER: 1	Last Name:		First:		Street or Rural Address where well is located (if unknown, distance and lirection from nearest town or intersection): If at owner's address, check here:					, distance and	
	City:		State:	ZIP:									
3	LOCAT		4 DEPTH	OF COM	IPLETED WELL: ft.			5 Latitude :(decimal degrees)					
	WITH " SECTIO			Encountered: 1)				Longitude:(decimal degrees)					
	NW	X]	2) ft. 3) ft., or 4) □ 1 WELL'S STATIC WATER LEVEL: □ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.					Datum: 🗌 WGS 84 🔲 NAD 83 🗌 NAD 27 <u>Source for Latitude/Longitude</u> : 🗋 GPS (unit make/model:) (WAAS enabled? 🗌 Yes 🗌 No) 🗋 Land Survey 🔲 Topographic Map					
W		E	after			Online Mapper:							
	SW	SE	Well water was ft. after hours pumping gpm										
	1			Estimated Yield:gpm						ft.			
		S		e Hole Diameter: in. to						□ Land Survey □ GPS □ Topographic Map			
	1 n			in. to	ft.	ft. 🗌 Other							
	7 WELL WATER TO BE USED AS:												
	Domestic: 5. Public Water Supply: well ID Dewatering: how many wells? 												
	🗌 Lawn &			Aquifer R									
	Livesto	ock	8. 🗆	g: well ID			eothermal: how many bores?						
	🗌 Irrigati	al Remediation: well I				a) Closed Loop 🔲 Horizontal 🗌 Vertical							
3. Feedlot Air Spar								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:												
					C 🗆 Other	C	ASIN	G IOINTS	· □	Glued Clamped	□ Welde	d 🗆 Threaded	
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to to ft., Diameter ft., Diameter in. to ft., Diameter ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. ft. TYPE OF SCREEN OR PERFORATION MATERIAL:													
□ Brass □ Galvanized Steel □ Concrete tile □ None used (open hole)													
SC	SCREEN OR PERFORATION OPENINGS ARE:												
		nuous Slot	☐ Mill Slot							Other (Specify)	•••••		
SC					Tire Wrapped Sa						ft to	ft	
					n ft. to								
9					Cement grout 🛛 🛛 Be								
Gı	out Interv	als: From	ft. to		ft., From	ft. to		ft., From		ft. to	ft.		
		-	le contaminati		D D '/ D '		— 1	·			1 0		
	□ Septic ' □ Sewer I			Lateral Line Cess Pool	s 🗌 Pit Privy 🗌 Sewage La	agoon		Livestock Per Fuel Storage		Insectici Abandor	Ų		
			nes					Fertilizer Sto					
	Other (Specify)											
							II? ft. FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS						
10	FROM	TO	L	ITHOLOG	FIC LOG	FRO	M	ТО	LIII	HO. LOG (cont.) or I	LUGGIN	GINTERVALS	
						Notes	:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged													
un	der mv it	irisdiction a	nd was compl	eted on (m	no-dav-vear)		and th	his record i	is tru	e to the best of my	knowled	ge and belief.	
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													
un	uer the b	usiness nam	Send one conv to	WATER W	ELL OWNER and retain	one for you	r recor	ds. Fee of \$5	 5.00 fc	r each constructed well			
	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												