

			-	····C-3			ion of Wate					
	Original Record Correction Chang			e in Well Use Fraction		esources App. No.			Township Number Range N		nga Number	
	County:								T S	-		
	county.						reet or Rural Address where well is located (if unknown, distance and					
Busines			1 1150.		rection from nearest town or intersection): If at owner's address, check here:							
Address	ss:											
	Address: City: State: 7ID:											
City:			State:	ZIP:								
	LOCATE WELL WITH "X" IN4 DEPTH OF COMPLETED WELL:						t. 5 Latitude: (decimal degrees)					
	ON BOX:	C: Depth(s) Groundwater Encountered: 1)					Longitude:(decimal degrees)					
~	N	2) ft. 3) ft., or 4) \Box Dry Well					Datum: WGS 84 NAD 83 NAD 27					
ΓX Γ	WELL'S STATIC WATER LEVEL: fit below land surface, measured on (mo-day-yr)							Source for Latitude/Longitude:				
	$ \square below fand surface, measured on (mo-day-yr) \square above land surface, measured on (mo-day-yr)$							□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)				
NW -	Pump test data: Well water was ft.						\Box Land Survey \Box Topographic Map					
w	E after hours pumping						Online Mapper:					
	- SW SE efter hours pumping and											
SW -	- SE	pumping	gpm 6			6 Elevation:ft. Ground Level TOC						
			Estimated Yield:gpm					Source: Land Survey GPS Topographic Map				
11	S mile	Bore Hole L	Bore Hole Diameter: in. to ft. and ft.					Other				
1 mile in. to ft. □ Other												
	Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease											
	Household I uone water supply: wen ib Household 6. Dewatering: how many wells?						11. Test Hole: well ID					
Lawı	Lawn & Garden 7. 🗌 Aquifer Recharge: well ID								□ Uncased □ Ge			
□ Live	stock	tock 8. Monitoring: well ID					12. Geotl	herma	al: how many bores?			
2. 🗌 Irriga									Loop 🔲 Horizontal			
	. 🗋 Feedlot 🔅 🗋 Air Sparge 🔅 Soil Vapor Ez						b) Open Loop Surface Discharge Inj. of Water					
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? Ves No												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Casing diameter in. to ft., Diameter in. to ft., Diameter ft.												
Casing height above land surface												
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)												
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.												
				Cement grout \square Be								
				ft., From	. ft. to		ft., From		ft. to	ft.		
Nearest so		ole contaminati	o n: Lateral Line	s 🗌 Pit Privy			ivestock Pe	anc		o Storago		
	r Lines		Tess Pool	\Box Sewage L	10001		uel Storage					
□ Wate	rtight Sewer L	ines	Seepage Pit	☐ Feedvard	.goon	\Box Fe	ertilizer Sto	orage				
Septe Funk Extering Entry Entry Entry Insected a 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 Oil Well/Gas Well												
Direction f	rom well?			Distance from w	/ell?							
10 FROM	ТО	L	ITHOLOG	GIC LOG	FROM		TO	LIT	HO. LOG (cont.) or P	LUGGIN	G INTERVALS	
					Notes:	- 1						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged												
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.												
-		neks.gov/waterwel			Jul 2 Buck		., 120,	P			SA 82a-1212	