

	WELL R	_		WWC-5		0461		sion of Wate						
Original Record Correction Changer I LOCATION OF WATER WELL:			ge in Well U		Resources App Section Num				Well ID er Range Number					
County:				Fraction	/4 ¹ /4			er	T S R		$\Box E \Box W$			
	· · · · · · · · · · · · · · · · · · ·								treet or Rural Address where well is located (if unknown, distance and					
							irection from nearest town or intersection): If at owner's address, check here:							
Address:											,			
Address: City: State: ZIP:														
3 LOCATE WELL														
WITH "		D WELL:												
SECTIO	Encountere			Long	Longitude:(decimal degrees)									
N	1	2) ft. 3) ft., or 4) Dr WELL'S STATIC WATER LEVEL:								WGS 84 INAI		NAD 27		
		□ below land surface, measured on (mo-day-yr)						Source for Latitude/Longitude:						
NW	NE	above land surface, measured on (mo-day-yr)						(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map						
		Pump test data: Well water was ft.												
w	E	after hours pumping gpm						Online Mapper:						
SW	Y - SE	Well water was ft.												
		after hours pumping gpm Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC						
	S		Bore Hole Diameter: in. to f					Source: Land Survey GPS Topographic I				Гороgraphic Map		
1 n	nile	in. to						□ Other						
7 WELL WATER TO BE USED AS:														
1. Domestic: 5. □ Public Water Supply: well ID □ Household 6. □ Dewatering: how many wells?														
										le: well ID d □ Uncased □ Geotechnical				
	□ Lawn & Garden 7. □ Aquifer R □ Livestock 8. □ Monitorir													
	□ Livestock 8. □ Monitoring: well ID . □ Irrigation 9. Environmental Remediation: well													
3. \Box Feedlo	Soil Vapor Extraction				b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water									
4. Industrial Recovery									13. Other (specify):					
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:														
Water well disinfected? \square Yes \square 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 in. to ft.														
Casing height above land surface														
	TYPE OF SCREEN OR PERFORATION MATERIAL:													
Steel Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole)														
SCREEN OR PERFORATION OPENINGS ARE:														
Contir	nuous Slot	☐ Mill Slot	\Box G	auze Wrap	ped 🗌 T	orch Cut	🗌 Dr	illed Holes		Other (Specify)				
		🗌 Key Puncl	ned 🗌 W	/ire Wrappe	ed 🗆 S	aw Cut	🗌 No	one (Open H	lole)					
										ft., From				
										ft., From				
		e contaminati		It., From	•••••	. It. to	•••••	It., From		ft. to	It.			
			Lateral Line	es 🔽	Pit Privy		ΠI	Livestock Pe	ns	☐ Insection	cide Storag	ge		
			Cess Pool	Ē	Sewage L	agoon	ΠF	Fuel Storage		🗌 Abando				
U Waterti	ight Sewer Li	nes 🔲 S	Seepage Pit] Pit Privy] Sewage L] Feedyard		🗆 F	Fertilizer Sto	rage	🗌 Oil We	ll/Gas We	1		
						• • • • • •				0				
10 FROM	TO		ITHOLO		ance from v	FRC				ft. HO. LOG (cont.) or		NGINTERVALS		
IU IROM	10	1				TRC	/1/1	10		110. LOG (colit.) of	I LUUUI	NO INTERVALS		
						NT 4	~							
						Note	s:							
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														
KS Departn	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.													
		eks.gov/waterwel			· ·							SA 82a-1212		