

	WELL R		WWC-5 1120	DI	vision of Wate			
Original Record Correction Change I LOCATION OF WATER WELL:						ion Number Township Number Range Number		
County:				¹ / ₄ T S R				
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
					rection from nearest town or intersection): If at owner's address, check here:			
Address:								
Address: City:		State:	ZIP:					
3 LOCAT	E WELL							
WITH "X" IN 4 DEPTH OF CO			IPLETED WELL:				(decimal degrees)	
SECTIO		1	epth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) \square 1			Longitude:(decimal degrees)		
N	N	WELL'S STATIC WA			Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:			
		below land surface			GPS (unit make/model:)			
NW NE		above land surface			$(WAAS enabled? \square Yes \square No)$			
		Pump test data: Well water was ft.			🗆 La	Land Survey Topographic Map		
WEE		after hour		Online Mapper:				
		Well v						
		after hours pumping gpm Estimated Yield:gpm			6 Elevation:ft. Ground Level TOC			
S		Bore Hole Diameter:	ft. and	Source: Land Survey GPS Topographic Map				
1 r			ft.	ft. 🗌 Other				
7 WELL WATER TO BE USED AS:								
1. Domestic: 5. Public Water Supply: well ID								
Housel		6. \Box Dewaterin						
\Box Lawn d			echarge: well ID			Cased Uncased Geotechnical		
2. 🗌 Irrigati	Livestock 8. Monitoring: well ID Irrigation 9. Environmental Remediation: well ID							
3. ☐ Feedlot						b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water		
4. 🗍 Industr					13. Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:								
Water well disinfected? \Box Yes \Box 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 in. Weight lbs./ft. Wall thickness or gauge No								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
Steel Steinless 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. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. o ft. to ft.								
Septic		Lateral Line	es 🗌 Pit Privy	Г	Livestock Per	ns 🗆 Insecti	cide Storage	
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)								
Direction from well? Distance from well? ft. 10 FROM TO LITHOLOGIC LOG FROM TO LITHOL LOG (cont.) or PLUGGING INTERVALS								
10 FROM	TO	LITHOLO	GICLOG	FROM	ТО	LITHO. LOG (cont.) of	PLUGGING INTERVALS	
				+	+			
	Notes:							
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 Wa	ter Well Cor	tractor's License No.		ter Well Re	cord was con	pleted on (mo-dav-v	rear)	
	usiness name	e of						
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.								
-				UU S W JACKSOI	1 St., Suite 420,	10peka, mansas 66612-130	KSA 82a-1212	
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212								