

		RECORD		WWC-5		1745		sion of Wate			X 7 11 T			
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction											Well II	ange Number		
County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$							$\begin{array}{c c} \hline \\ \hline $							
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and														
Business:									rection from nearest town or intersection): If at owner's address, check here:					
Address: Address:														
City: State: ZIP:														
3 LOCATE WELL														
	WITH "X" IN 4 DEPTH OF COMPLETED WELL:							8 /						
	SECTION BOX: Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) \Box													
I I	WELL'S STATIC WATER LEVEL:									WGS 84 INAE Latitude/Longitude:		J NAD 27		
	X	below 1								unit make/model:)		
NW	NE		e land surface, measured on (mo-day-yr							WAAS enabled?				
	Pump test data: Well water was ft.						Land Survey Topographic Map							
W	E	after	after hours pumping gp Well water was ft.						nline	e Mapper:	•••••			
SW	SE	after	after hours pumping											
		Estimated Yield:gpm					6 Elevation:ft. Ground Level							
	S	Bore Hole I	Bore Hole Diameter: in. to								and Survey 🔲 GPS 🗌 Topographic Map			
1 r				in.	to	ft.		□ Other						
7 WELL WATER TO BE USED AS:														
1. Domestic:														
	Household 6. Dewatering: how many wells? Lawn & Garden 7. Aquifer Recharge: well ID													
	Livestock 8. Monitoring: well ID									al: how many bores				
2. 🗍 Irrigati										Loop Horizonta				
	3. 🗌 Feedlot 🗌 Air Sparge 🗌 Soil Vapor Ex									Loop 🗌 Surface Dis				
4. \Box Industrial \Box Recovery \Box Injection13. \Box Other (specify):														
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:														
	Water well disinfected? Yes 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													
		inless Steel	Fiber		□ PVC			□ Oth	her (S	Specify)				
SCREEN C	SCREEN OR PERFORATION OPENINGS ARE:													
	nuous Slot	☐ Mill Slot		auze Wrapp						Other (Specify)				
		Key Puncl												
										ft., From				
										ft., From				
										ft. to				
		le contaminati		,										
Septic 2			Lateral Line	es 🗌	Pit Privy			livestock Pe		Insectic				
Sewer]			Cess Pool		Sewage L	agoon		uel Storage		Abando				
	ight Sewer Li	ines 🗌 S	Seepage Pit		Feedyard		ΠĿ	ertilizer Sto	orage	🗌 Oil Wel	I/Gas W	ell		
Other (Specify) Direction from well? ft.														
10 FROM	ТО		ITHOLO			FRO				HO. LOG (cont.) or		ING INTERVALS		
						Notes	:							
	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged													
under my ju	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														
under the business name of														
KS Departr	nent of Health	and Environment	, Bureau of V	Vater, Geolog	gy Section, 1	000 SW Jac	kson S	t., Suite 420,	Tope	ka, Kansas 66612-136'	7. Teleph	one 785-296-3565.		
Visit us at h	ttp://www.kdh	eks.gov/waterwel	l/index.html									KSA 82a-1212		