

W			RECORD		· · · C-3	4793		ion of Wate			W-II ID		
1		Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction					Resources App. No. Section Number			Well ID Township Number Range Number			
T	County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$											$\Box E \Box W$	
2		· OWNER:	Last Name		First:		$\frac{1}{4}$ TSR \Box EWreet or Rural Address where well is located (if unknown, distance and						
-	Business: Address: Address:	o with En.	G		lirection from nearest town or intersection): If at owner's address, check here:								
-	City:			State:	ZIP:								
3	LOCAT		OF COM	IPLETED WELL:		ft.	5 Latit	ude:			(decimal degrees)		
	SECTIO				Encountered: 1)			Longitude:(decimal degrees)					
	N			3) ft., or 4)			Datur	n: 🗌	WGS 84 🛛 NAD	83 🗌 N	NAD 27		
			ATIC WA					Latitude/Longitude:					
				 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 				☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)					
	NW	NE		Pump test data: Well water was ft. after hours pumping gpu Well water was ft.					\Box Land Survey \Box Topographic Map				
W			- 0										
	CW	1											
	SW	X		after hours pumping gpm					6 Elevation:ft. Ground Level TOC				
		Estimated Yield:gpm											
	-	S Bore Hole Diameter: in. to in. to											
7 WELL WATER TO BE USED AS:													
	Domestic:				ter Supply: well ID		10. 🗌 Oil Field Water Supply: lease						
	House	nold			g: how many wells?				11. Test Hole: well ID				
	_	Lawn & Garden7. Aquifer Recharge: well ID											
		Livestock 8. Monitoring: well ID Irrigation 9. Environmental Remediation: well ID								al: how many bores?			
	☐ Irrigati ☐ Feedlor						Loop 🗌 Horizonta						
	. □ Feedlot □ Air Sparge □ Soil Vapor Ex . □ Industrial □ Recovery □ Injection							b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):					
	Was a chemical/bacteriological sample submitted to KDHE? Yes In Jettorian												
	Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box No If yes, date sample was submitted:												
	8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
	Casing diameter ft., Diameter ft., Diameter ft., Diameter ft., Diameter ft., Diameter												
	Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
T	TYPE OF SCREEN OR PERFORATION MATERIAL:												
	□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)												
50	□ Brass □ Galvanized Steel □ Concrete tile □ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:												
50	□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)												
								ne (Open H					
SC					n ft. to	ft., F	rom	ft. t	0	ft., From	ft. to	ft.	
	G	RAVEL PA	ACK INTERVA	ALS: Fron	n ft. to	ft., F	rom	ft. t	0	ft., From	ft. to	ft.	
					Cement grout \square B								
			ft. to ble contamination		ft., From	. ft. to		ft., From		ft. to	ft.		
	Septic '	-		on: Lateral Line	es 🗌 Pit Privy			ivestock Pe	ens	☐ Insectici	de Storage		
	Separe I				Sewage La	agoon		uel Storage					
	🗌 Waterti	ght Sewer I	Lines 🗆 S	leepage Pit	Feedyard			ertilizer Sto					
					Distance from w					ft.		CINTEDVALO	
10	FROM	TO		ITHOLOG	JICLUG	FRO	INI	ТО	LH	HO. LOG (cont.) or I	PLUGGIN	GINTERVALS	
						Note	s:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 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.												
	-		heks.gov/waterwell		. ,			- ,	1			SA 82a-1212	