

WATER WELL R		WWC-5 1131	DI	vision of Water			
Original Record Correction Change     LOCATION OF WATER WELL:					rces App. No. Well ID on Number Township Number Ra		
County:					T S	$\begin{array}{c c} R & R & R & R \\ \hline R & R & R & R \\ \hline R & R \\ \hline$	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and							
Business:			nearest town or intersection): If at owner's address, check here:				
Address:							
Address:	State:	700.					
City: <b>3 LOCATE WELL</b>	State:	ZIP:					
WITH "X" IN	TTH "Y" IN 4 DEPTH OF COMPLETED WELL:						
SECTION BOX:	Depth(s) Groundwater		Longitude:(decimal degrees)				
Ν		3) ft., or 4)			Datum: WGS 84 NAD 83 NAD 27		
	WELL'S STATIC WA			for Latitude/Longitude:	、 、		
NW NE	above land surface						
NW NE	Pump test data: Well v		Land Survey Topographic Map				
W A E		after hours pumping gpm			Online Mapper:		
SW   SE	Well water was ft.						
	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 mile		ft.	$\square \text{ Other } \dots $				
7 WELL WATER TO BE USED AS:							
1. Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease							
☐ Household	6. 🗌 Dewaterii		11. Test Hole: well ID				
Lawn & Garden	7. 🗌 Aquifer R		Cased Uncased Geotechnical				
	8. 🗌 Monitorir			12. Geothermal: how many bores?			
<ol> <li>2. ☐ Irrigation</li> <li>3. ☐ Feedlot</li> </ol>	9. Environmental Remediation: well ID Air Sparge Soil Vapor Ext			a) Closed Loop			
4. Industrial	$\square \text{ Recovery} \square \text{ Injection}$			13. $\Box$ Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE?       Yes       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 in. to ft.							
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No.							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
□ 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)							
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.							
9 GROUT MATERIAL:  Neat cement  Cement grout Bentonite Other							
Grout Intervals: From							
Nearest source of possible contamination:							
□ 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							
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)							
Direction from well?							
10 FROM TO	LITHOLO		FROM			LUGGING INTERVALS	
<u> </u>							
<u> </u>							
<b>├</b> ───┤							
Notes:							
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 Cor	tractor's License No	This Wa	ter Well Re	cord was con	pleted on (mo-day-yea	r)	
under the business name	<u>e of</u>						
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.							
Visit us at <u>http://www.kdheks.gov/waterwell/index.html</u> KSA 82a-1212							