

M	_		RECORD		WWC-5 1087	L		of Water													
1		Record	e in Well Use	Resourc				Well ID													
I	County		ATER WEL	L:	Fraction Sect $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$			on Number Township Number Range Number T S R \square E \square W													
2		OWNER: 1	ast Nama				Street or Rural Address where well is lo														
4	Business:		Last Ivanie.					rest town or intersection): If at owner's address, check here:													
	Address:					uncenon no				- 5 uuu - 555, 1											
	Address:			C+-+-+	710.																
2	City: LOCAT			State:	ZIP:																
3	WITH "					PLETED WELL: ft.			le:		(decimal degrees)										
		SECTION BOX: N Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4)						Longitude:													
	Ν	1			3) ft., or 4) ∟ TER LEVEL:					84 🗌 NAD 83 🗌 NAD 27											
				elow land surface, measured on (mo-day-y				Source for Latitude/Longitude:													
	NW	NF		above land surface, measured on (mo-day-yr)					(WAAS enabled? [] Yes [] No)												
				Pump test data: Well water was ft.					□ Land Survey □ Topographic Map												
W		E	after	after hours pumping gpm					Online Mapper:												
	SW	SE	- f t	Well water was ft.																	
				after hours pumping gpm Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC												
		X		re Hole Diameter: in. to				Source: Land Survey GPS Topographic Map													
	1 mile in. to																				
7 WELL WATER TO BE USED AS:																					
	1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 																				
	Housel				ng: how many wells?			11. Test Hole: well ID													
	\Box Lawn δ			-	echarge: well ID			Cased Uncased Geotechnical													
	☐ Livestock 8. ☐ Monitoring: well ID ☐ Irrigation 9. Environmental Remediation: well II																				
	☐ Feedlo			Air Sparge				b) Open Loop \Box Surface Discharge \Box Inj. of Water													
	🗌 Industr			Recovery	Injection		13. 🗌 Other (specify):														
W	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:																					
□ 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.																					
					Cement grout Be																
			II. to le contaminatio		ft., From	II. to	п.	, From	п. ю	n.											
	Septic '	-		Lateral Line	es 🗌 Pit Privy	1	Livest	tock Pens	Insecti	cide Storage											
	Sewer l	Lines		Cess Pool	Sewage Lag		Fuel S			oned Water	Well										
	U Waterti	ght Sewer Li	nes 🗆 S	Seepage Pit	☐ Feedyard		Fertili	izer Stora	ige 🗌 Oil We	ell/Gas Well											
					D:				۰.												
	FROM	TO		ITHOLO	Distance from we	FROM	1		π ITHO. LOG (cont.) o		GINTERVALS										
10	TROM	10	L	molo		TROM			11110: LOG (cont.) 0		JITTERVILLS										
						1															
						_															
						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 Contractor's License No This Water Well Record was completed on (mo-day-year) under the business name of																					
ull		usiness liall	Send one copy to	WATER W	ELL OWNER and retain of	one for your r	ecords. F	Fee of \$5.0	0 for each constructed we	ell.											
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>h</u>	ttp://www.kdh	eks.gov/waterwell	/index.html						KS	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										