

M			RECORD		WWC-5 1371			ion of Wat					
			Correction	e in Well Use				ources App. No.			Well ID		
T	County		ATER WEL	L:	Fraction 1/4 1/4 1/4	Secti	Section Number Township Nu			-			
2		OWNER: I	act Nama				<sup>1</sup> / <sub>4</sub> T         S           reet or Rural Address where well is located (if u						
4	Business:		Last Ivanie.			direction from nearest town or intersection): If at owner's address, check here:							
	Address:					uneedion n					5 <b>uuu</b> 055, 1		
	Address:		States	710.									
2	City: LOCAT			State:	ZIP:								
3	WITH "			IPLETED WELL: .		ft.	5 Latitude:(decimal degrees)						
	SECTIO			Encountered: 1)			Longitude:						
	Ν	1			3) ft., or 4) [ TER LEVEL:		11	Datum: 🗌 WGS 84 🔲 NAD 83 🗌 NAD 27					
					, measured on (mo-day-			Source for Latitude/Longitude:					
	NW	<b>X</b> F		above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
	1	1.02		Pump test data: Well water was ft.									
W		E	after	after hours pumping gpm									
	SW	SE	- <del>(</del> +	Well water was ft.									
				after hours pumping gpm stimated Yield:				6 Eleva	<b>Elevation</b> :ft.  Ground Level  TOC				
		5			gpm in. to	ft. and		Source: Land Survey GPS Topographic Map					
	1 n	nile			in. to ft.			□ Other					
7	7 WELL WATER TO BE USED AS:												
	Domestic:				ter Supply: well ID				Oil Field Water Supply: lease				
	Housel			6. Dewatering: how many wells?				11. Test Hole: well ID					
	Lawn & Garden       7. Aquifer Recharge: well ID         Livestock       8. Monitoring: well ID												
	🗋 Livesia			al Remediation: well ID									
	☐ Feedlo								n Loop 🗌 Surface Discharge 🔲 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:												
			? □Yes □]	-						1			
8	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       Steinless Steel       Fiberglass       PVC       Other (Specify)         Brass       Galvanized Steel       Concrete tile       None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE:													
	Contir	uous Slot	☐ Mill Slot	🗌 Ga	auze Wrapped 🛛 🗌 To	rch Cut	🗌 Dri	lled Holes		Other (Specify)			
								ne (Open H					
SC					1 ft. to								
GRAVEL PACK INTERVALS: From													
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other ft. From ft. to													
			le contaminatio		, 110	11. 10	•••••	π., гтош		11. 10	It.		
	Septic '	-		ateral Line	s 🗌 Pit Privy			ivestock Pe	ens	🗌 Insectici	de Storage		
	Sewer			Cess Pool	□ Sewage Lag	goon		uel Storage		☐ Abandor		Well	
					☐ Feedyard		$\Box$ Fe	ertilizer Sto	orage	🗌 Oil Well	/Gas Well		
	□ Other (Specify) Direction from well? ft.												
	FROM	TO		ITHOLOG		FROM		ТО		HO. LOG (cont.) or I	PLUGGIN	GINTERVALS	
						_							
						+							
						Notes	•						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a 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													
under the business name 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.												785-296-3565.	
_ `	Visit us at <u>h</u>	ttp://www.kdh	eks.gov/waterwell	/index.html							KS	SA 82a-1212	