

	WELL R			WWC-5	1126	6819		ion of Wate			<b>XX</b> 7 11 <sup>-</sup>			
Original Record       Correction       Change in Well Use         1       LOCATION OF WATER WELL:       Fraction									ces App. No.			Well ID Range Number		
$\begin{array}{c c} 1 & \text{LOCATION OF WATER WELL:} \\ \hline \\ County: & 1/4 & 1/4 & 1/4 \end{array}$							Section NumberTownship NumberRange Number $\frac{1}{4}$ TSREW							
2 WELL OWNER: Last Name:       First:       Street or Rural Address where well is located (if unknown, distance and stance and														
Business: direction from nearest town or intersection): If at owner's address, check here:														
Address: Address:														
City:			ZIP:											
3 LOCAT	E WELL		State:											
WITH "X" IN 4 DEPTH OF COMPLETED WELL:														
	<b>SECTION BOX:</b> Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) $\Box$							Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27						
N	1			TER LEVEL								_ NAD 27		
	X	below land surface, measured on (mo-day-yr)						Source for Latitude/Longitude:						
NW	NE	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 hours pumping					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: in. to					and <u>Source</u> : Land Survey GPS Topo						
1 n		in. to ft.						□ Other						
7 WELL WATER TO BE USED AS:														
1. Domestic: 5. Dublic Water Supply: well ID														
☐ Housel ☐ Lawn &		6. □ Dewatering: how many wells? 7. □ Aquifer Recharge: well ID							11. Test Hole: well ID					
										al: how many bores				
2. 🗌 Irrigati	_ 5									Loop  Horizonta				
3. 🗌 Feedlo	E									Loop 🔲 Surface Dis				
4. 🗌 Industr			13. 🗌 Other (specify):											
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       Fiberglass         PVC       Other (Specify)														
☐ Steel ☐ Brass			☐ Fiber	0	PVC None 1	used (one	n hole)		ier (S	specify)	••••			
	☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:													
	nuous Slot	☐ Mill Slot		auze Wrappe	d 🗌 To	orch Cut	🗌 Dri	illed Holes		Other (Specify)				
		🗌 Key Puncl	ned 🗌 W	/ire Wrapped	🗆 Sa	w Cut	🗌 No	ne (Open H	Iole)					
										ft., From				
										ft., From				
		ft. to l <b>e contaminati</b>		ft., From	• • • • • • • • • • • • • • • • •	ft. to	•••••	ft., From		ft. to	ft.			
Septic '			un: Lateral Line	s ⊓I	Pit Privy			ivestock Pe	ens	Insectic	ide Stor	rage		
			Cess Pool		Sewage La	goon		uel Storage						
	ght Sewer Lin	nes 🗆 S	Seepage Pit		Feedyard			ertilizer Sto						
					ce from w					ft.	DLUG			
10 FROM	TO	I	ITHOLO	GICLOG		FRC	0M	TO	LIT	HU. LUG (cont.) or	PLUG	GING INTERVALS		
						-								
						Note	s:	I						
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 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.														
					Section, 10	000 SW Ja	ckson S	t., Suite 420,	Tope	ka, Kansas 66612-136	7. Telep			
Visit us at h	<u>ttp://www.kdhe</u>	ks.gov/waterwel	l/index.html									KSA 82a-1212		