

|  |  | RECORD            |  | WWC-5 1083  |            |   | sion of Wate   |   |                                   |                      |             |  |  |
|--|--|-------------------|--|---|------------|---|--|---|-----------------------------------|----------------------|-------------|--|--|
|  | Original Record Correction Change     LOCATION OF WATER WELL:  |                   |  |   |            |   | esources App. No.  |   |                                   | Well ID Range Number |             |  |  |
|  |  |                   |  |   | 1/4        | Section Number Township N   |  |   | Township Number<br>T S            | -                    |             |  |  |
|  | OWNER  | • Last Name:      |  | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |            | Rura  | 1 Address  | whe   | re well is located (i             |                      |             |  |  |
| Busines<br>Address<br>Address  | s:<br>:  | Last Mane.        | State:   |   |            | tion from nearest town or intersection): If at owner's address, check here: |  |   |                                   |                      |             |  |  |
| City:  |  |                   | ZIP:   |   |            |   |  |   |                                   |                      |             |  |  |
| 3 LOCA'<br>WITH  | "X" IN   | 4 DEPTH           | I OF COM   |   | ft.        | <b>5 Latitude</b> :(decimal degrees)  |  |   |                                   |                      |             |  |  |
|  | ON BOX:  |                   | Depth(s) Groundwater Encountered: 1) ft.                             |   |            |   |  |   | Longitude:(decimal degrees)       |                      |             |  |  |
|  | Ν  |                   | 2) ft. 3) ft., or 4) 	Dry Well<br>WELL'S STATIC WATER LEVEL: ft.     |   |            |   |  |   | Datum: 🗌 WGS 84 🔲 NAD 83 🗌 NAD 27 |                      |             |  |  |
|  | □ below land surface, measured on (mo-day-yr).   |                   |  |   |            |   | Source for Latitude/Longitude:   |   |                                   |                      |             |  |  |
| NW -   | NE   |                   | above land surface, measured on (mo-day-yr)                          |   |            |   |  | $(WAAS enabled? \square Yes \square No)$            |                                   |                      |             |  |  |
|  |  | -                 | Pump test data: Well water was ft.                                   |   |            |   |  | □ Land Survey □ Topographic Map<br>□ Online Mapper: |                                   |                      |             |  |  |
| W  |  | E after           | after hours pumping  |   |            |   |  |   |                                   |                      |             |  |  |
| SW -   | SE   | after             | Well water was ft.<br>after hours pumping gpm<br>Estimated Yield:gpm |   |            |   |  |   |                                   |                      |             |  |  |
| X  |  |                   |  |   |            |   |  | 6 Elevation:ft.  Ground Level  TOC                  |                                   |                      |             |  |  |
|  | S  |                   | Bore Hole Diameter: in. to ft. and                                   |   |            |   |  | Source:  Land Survey  GPS  Topographic Map          |                                   |                      |             |  |  |
| 1  | mile   |                   | in. to ft.   |   |            |   |  | ☐ Other   |                                   |                      |             |  |  |
| <b>7 WELL WATER TO BE USED AS:</b><br>1. Domestic: 5. □ Public Water Supply: well ID   |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
|  | Domestic:       5. □ Public Water Supply: well ID         □ Household       6. □ Dewatering: how many wells? |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
|  | awn & Garden 7. 🗌 Aquifer Recharge: well ID  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
| □ Lives  | tock   | 8. [              | 8. Monitoring: well ID   |   |            |   |  |   | al: how many bores?               |                      |             |  |  |
| 2. 🗌 Irriga  |  |                   |  |   |            |   | a) Closed Loop 🗌 Horizontal 🗌 Vertical                                     |   |                                   |                      |             |  |  |
|  | 3. □ Feedlot     □ Air Sparge     □ Soil Vapor Ex       4. □ Industrial     □ Recovery     □ Injection       |                   |  |   |            |   | b) Open Loop □ Surface Discharge □ Inj. of Water<br>13. □ Other (specify): |   |                                   |                      |             |  |  |
| Was a chemical/bacteriological sample submitted to KDHE?       Yes       No       If yes, date sample was submitted:   |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
| Water well disinfected? Yes 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)  |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)   |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
|  |  |                   |  | n ft. to  |            |   |  |   |                                   |                      |             |  |  |
| GRAVEL PACK INTERVALS: From  |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other   |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
|  |  | ible contaminat   |  |   | 11. 10     |   | 11., 110111  |   |                                   | It.                  |             |  |  |
| 🗌 Septie   | -  |                   | Lateral Line   |   |            |   | ivestock Pe  |   | Insecticio                        |                      |             |  |  |
| Sewer  |  |                   | Cess Pool  | ☐ Sewage La   | igoon      |   | uel Storage  |   | Abandon                           |                      | Well        |  |  |
| □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)   |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
| Direction from well? ft.   |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
| 10 FROM  | ТО   | ]                 | LITHOLOG   | GIC LOG   | FROM       | M   | ТО   | LIT   | HO. LOG (cont.) or F              | PLUGGIN              | G INTERVALS |  |  |
|  |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
|  |  | -                 |  |   |            |   |  |   |                                   |                      |             |  |  |
|  |  | +                 |  |   |            |   |  |   |                                   |                      |             |  |  |
|  |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
|  |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
|  |  |                   |  |   | 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)  |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
| under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.<br>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 constructed well.<br>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. |  |                   |  |   |            |   |  |   |                                   |                      |             |  |  |
| -  |  | theks.gov/waterwe |  | , and, Geology Stelloll, It                           | 50 5 W Jac |   | ., 5unt 420,   | rope  | , ixiiisas 00012-1307.            |                      | SA 82a-1212 |  |  |