

	WELL R		WWC-5 <sup>1142</sup>	DI	vision of Wate				
Original Record       Correction       Chang         1       LOCATION OF WATER WELL:						rces App. No. Well ID Well ID On Number Township Number Range Number			
County:					Section Number Township		$\begin{array}{c} R \\ R \\ E \\ E \\ W \end{array}$		
County:       1/4       1/4       1/4       I       T       S       R       E       I         2       WELL OWNER: Last Name:       First:       Street or Rural Address where well is located (if unknown, distance a									
					rection from nearest town or intersection): If at owner's address, check here:				
Address:									
Address: City: State: ZIP:									
3 LOCATE WELL									
WITH "X" IN 4 DEPTH OF COMPLETED WELL									
	<b>SECTION BOX:</b> N Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) $\Box$					Longitude:			
N	J		TER LEVEL:		Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:				
			, measured on (mo-day-				<u>.</u> )		
NW	NE	above land surface	] above land surface, measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ☐ No)			
		-	vater was f			Land Survey Topographic Map			
W	E		after hours pumping gp Well water was ft.			Online Mapper:			
SW	SE		s pumping						
Estimated Yield:				Spin		6 Elevation:ft. Ground Level TOC			
	S		in. to	ft. and	Source	Source:  Land Survey  GPS  Topographic Map			
1 n			in. to	ft.	ft. 🗌 Other				
7 WELL WATER TO BE USED AS:									
1. Domestic:       5. □ Public Water Supply: well ID         □ Household       6. □ Dewatering: how many wells?									
			echarge: well ID			11. Test Hole: well ID ☐ Cased ☐ Uncased ☐ Geotechnical			
	□ Livestock								
2. □ Irrigation 9. Environmental Remediation: we									
3. 🗌 Feedlot 🗌 Air Sparge				Extraction		b) Open Loop 🗌 Surface Discharge 📋 Inj. of Water			
4. Industrial Recovery Injection 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:									
$\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ Fiberglass} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots \dots$									
☐ 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. to ft. comments ft. to ft. From									
GRAVEL PACK INTERVALS:       From									
Grout Intervals: From									
		e contamination:			,				
Septic '		Lateral Line			Livestock Pe		cide Storage		
Sewer Lines     Cess Pool     Sewage Lagoon     Fuel Storage     Abandoned Water Well									
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)									
Direction from well? ft.									
10 FROM	TO	LITHOLO		FROM			r PLUGGING INTERVALS		
				Notes:	I				
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)									
							ear)		
		Send one copy to WATER W	/ELL OWNER and retain	one for your rec	ords. Fee of \$5	.00 for each constructed we	ell.		
-				000 SW Jackson	n St., Suite 420,	Topeka, Kansas 66612-136	57. Telephone 785-296-3565.		
Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212									