

W			RECORD	Form		5	9398		sion of Wate						
1	Original Record Correction Chang							sources App. No.			er Range Number				
T	County:			1/4 1/4 1/4 1/4			Sect	T S			$\begin{array}{c} R \\ R \\ \Box E \\ \Box W \end{array}$				
2		OWNER:	Last Name:	First:		r Rura	al Address	Address where well is located (if unknown, distance and							
	Business:	Business:							direction from nearest town or intersection): If at owner's address, check here:						
	Address: Address:														
	City:			State:	ZIP:										
3	3 LOCATE WELL 4 DEPTH OF COM					IPLETED WELL: ft.									
	WITH "X" IN Depth(s) Groundwater				Encountered: 1) ft.				5 Latitude:(decimal degrees) Longitude:(decimal degrees)						
						ft., or 4) 🗌 Dry Well				Datum: WGS 84 NAD 83 NAD 27					
		· · · · · · · · · · · · · · · · · · ·	WELL'S ST	WELL'S STATIC WATER LEVEL: ft.						Source for Latitude/Longitude: ☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)					
				below land surface, measured on (mo-day-yr)											
	NW	NE		D above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.											
			- 0	after hours pumping						□ Land Survey □ Topographic Map □ Online Mapper:					
" SW SE				Well water was ft.											
	Sw	SE		after hours pumping gpm						6 Elevation:ft. Ground Level TOC					
		 S		Estimated Yield:gpm Bore Hole Diameter: in. to ft. and					Source: Land Survey GPS Topographic Map						
	l1 n		Dore Hole I	in. to											
7	7 WELL WATER TO BE USED AS:														
1.	Domestic:			5. Public Water Supply: well ID					10. Oil Field Water Supply: lease						
Household				6. Dewatering: how many wells?					11. Test Hole: well ID						
					quifer Recharge: well ID					Cased Uncased Geotechnical					
					g: well ID al Remediation: well ID					12. Geothermal: how many bores? a) Closed Loop					
3. EFeedlot				☐ Air Sparge ☐ Soil Vapor Ext						b) Open Loop \square Surface Discharge \square Inj. of Wa					
4.	🗌 Industr	ial		Recovery	□ Injection				13. 🗌 Ot	13. 🗌 Other (specify):					
			0	-	itted to 1	KDHE?]Yes 🗌	No	If yes, date	e san	nple was submitte	d:			
			1? 🗌 Yes 🔲												
											Glued Clamped		d 🗌 Threaded		
											or gauge No.				
							10	5./1t.	wan uner	thess	of gauge 10	•••••			
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Fiberglass PVC Other (Specify)															
Brass Galvanized Steel Concrete tile None used (open hole)															
SC			RATION OPE			1 🗆 7				_					
		uous Slot red Shutter	☐ Mill Slot ☐ Key Puncl		auze Wrap				one (Open H		Other (Specify)	•••••			
SC											ft., From	ft. to	ft.		
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. of the second secon															
					. ft., From	1	. ft. to	•••••	ft., From		ft. to	ft.			
	earest sou		ble contaminati	on: Lateral Line	с Г] Pit Privy		Пι	Livestock Pe	ne		ide Storage			
	Septic Sewer l			Cess Pool		Sewage L	agoon		Fuel Storage			oned Water			
		ght Sewer I		Seepage Pit		Feedyard			Fertilizer Sto			ll/Gas Well			
	FROM	m well? TO		ITHOLO			FRC		ТО		HO. LOG (cont.) or		GINTEDVALS		
10		10	1		JIC LUG		FKU	141	10		110. LOG (colit.) of	LUUUIN	G INTERVALS		
							Nata								
Notes:															
11	CONT	RACTOR	'S OR LANDO	OWNER'S	S CERTI	FICATIO	N: This	water	well was		onstructed, 🗌 reco	nstructed.	or 🗌 plugged		
un	ider my ju	irisdiction	and was compl	eted on (n	no-day-ye	ear)		and tl	his record i	is tru	e to the best of my	y knowled	ge and belief.		
											ted on (mo-day-ye				
u		usiness lidl	Send one copy to	WATER W	ELL OWN	ER and retain	n one for yo	ur recor	ds. Fee of \$5	5.00 f	or each <u>constructed</u> we	<u></u> 11.			
	KS Departn	nent of Health									ka, Kansas 66612-136	7. Telephone	2785-296-3565.		