

| | | RECORD | | WWC-5 | | 9951 | | sion of Wate | | | XX / 11 TT | | | |
|--|---|------------------|--|---------------|---------------|--------------------|-------------|-----------------|---|-----------------------------------|---------------------|-------------------|--|--|
| Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction | | | | | se | | Resources A | | | | | | | |
| $\begin{array}{c c} 1 & \text{LOCATION OF WATER WELL:} \\ \hline \\ County: & 1/4 & 1/4 & 1/4 \end{array}$ | | | | | | /4 ¹ /4 | | | | | | | | |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and | | | | | | | | | | | | | | |
| | Business: din | | | | | | | | irection from nearest town or intersection): If at owner's address, check here: | | | | | |
| Address: | | | | | | | | | | | | | | |
| Address: City: | City: State: ZIP: | | | | | | | | | | | | | |
| 3 LOCATE WELL | | | | | | | | | | | | | | |
| | WITH "X" IN 4 DEPTH OF COMPLETED WELL: | | | | | | | | | | | | | |
| | SECTION BOX: Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) \Box | | | | | | | | | | | | | |
| I I | WELL'S STATIC WATER LEVEL: | | | | | | | | | | | | | |
| | | | below land surface, measured on (mo-day-yr) | | | | | | | unit make/model: | |) | | |
| NW | NE | | above land surface, measured on (mo-day-yr) | | | | | | | |] No) | | | |
| | | - | Pump test data: Well water was ft. | | | | | | | Survey 🔲 Topogra | | | | |
| W | E | after | after hours pumping gp Well water was ft. | | | | | Online Mapper: | | | | | | |
| SW | SE | after | after hours pumping | | | | | | | | | | | |
| | | | Estimated Yield:gpm | | | | | | | on :ft. Ground Level TOC | | | | |
| | S | Bore Hole I | Bore Hole Diameter: in. to | | | | | | | | GPS Topographic Map | | | |
| 1 r | | | in. to | | | | □ Other | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | | | |
| | 1. Domestic: 5. □ Public Water Supply: well ID □ Household 6. □ Dewatering: how many wells? | | | | | | | | | | | | | |
| | Household6. Dewatering: how many wells?Lawn & Garden7. Aquifer Recharge: well ID | | | | | | | | | | | | | |
| | | | | | | | | | | al: how many bores | | | | |
| 2. 🗍 Irrigati | — • | | | | | | | | | Loop 🗌 Horizonta | | | | |
| 3. 🗌 Feedlo | B. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex | | | | | | | | | 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? 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 | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| ☐ Brass | | | | | | | | | | | | | | |
| SCREEN C | SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | | | |
| | nuous Slot | ☐ Mill Slot | | auze Wrapp | | | | | | Other (Specify) | | | | |
| | | Key Puncl | | | | | | | | | c | | | |
| | | | | | | | | | | ft., From | | | | |
| | | | | | | | | | | ft., From | | | | |
| | | | | | | | | | | ft. to | | | | |
| | | ole contaminati | | , | | | | , | | | | | | |
| Septic 2 | | | Lateral Line | es 🗌 | Pit Privy | | | Livestock Pe | | Insectic | | | | |
| | | | Cess Pool | | Sewage L | agoon | | Fuel Storage | | Abando | | | | |
| | ight Sewer L | ines 🗆 S | Seepage Pit | | Feedyard | | | Fertilizer Sto | rage | 🗌 Oil Wel | I/Gas We | ll | | |
| Other (Specify) Direction from well? ft. | | | | | | | | | | | | | | |
| 10 FROM | ТО | | ITHOLO | | | FRO | | | | HO. LOG (cont.) or | PLUGG | ING INTERVALS | | |
| | | | | | | | | | | | | | | |
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| | | | | | | Note | s: | | | | | | | |
| | | | | | | | - • | | | | | | | |
| | | | | | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged | | | | | | | | | | | | | | |
| under my ju | urisdiction a | and was compl | leted on (n | no-day-yea | r) Thia W | (otor W 7-1 | and th | his record i | s tru | te to the best of my | / knowle | edge and belief. | | |
| Kansas Water Well Contractor's License No | | | | | | | | | | | | | | |
| under the business name of | | | | | | | | | | | | | | |
| KS Departr | nent of Health | and Environment | , Bureau of V | Water, Geolog | gy Section, 1 | 000 SW Ja | ekson S | St., Suite 420, | Tope | ka, Kansas 66612-136 | 7. Teleph | one 785-296-3565. | | |
| Visit us at h | <u>ttp://www.kdł</u> | eks.gov/waterwel | l/index.html | | | | | | | |] | KSA 82a-1212 | | |