

	WELL R			WWC-5		5722		sion of Wate			XX7 11		
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction								irces App. No.		Township Number		Range Number	
County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$							$\begin{array}{c c} 1 \\ 1 \\ 1 \\ 4 \\ 1 \\ 1 \\ 1 \\ 4 \\ 1 \\ 1 \\$						
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and													
Business: direction from nearest town or intersection): If at owner's address, check he											ess, check here: 🗌		
Address: Address:													
City: State: ZIP:													
3 LOCATE WELL WITH WY IN 4 DEPTH OF COMPLETED WELL:								- -	1				
WITH "			Depth(s) Groundwater Encountered: 1)					ft. 5 Latitude:(decimal degrees) Longitude:(decimal degrees)					
SECTIO N			2) ft. 3) ft., or 4) 🗆 D										
		WELL'S STATIC WATER LEVEL: ft.						Source for Latitude/Longitude:					
		below land surface, measured on (mo-day-yr)						□G		unit make/model:			
NW	NE	D above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.						(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
w	E	after hours pumping											
	1	Well water was ft.											
^{SW-} X	SE	after hours pumping gpm						6 Elevation:ft. Ground Level TOC					
	 S		Estimated Yield:gpm Bore Hole Diameter:in. toft.					Source: Land Survey GPS Topographic					
1 n	-	in. to ft.											
7 WELL WATER TO BE USED AS:													
1. Domestic:		ter Supply: v											
			6. Dewatering: how many wells?						11. Test Hole: well ID				
Lawn &			7. Aquifer Recharge: well ID							$\Box \text{ Uncased } \Box \text{ G}$ al: how many bores			
2. 🗌 Irrigati										Loop Horizonta			
3. 🗌 Feedlo	- 6							b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water					
4. 🗌 Industr		🗌 In			13.								
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		nless Steel	🗌 Fiber	glass	DPVC			🗌 Otł	her (S	Specify)			
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:													
					1				_				
	uous Slot red Shutter	☐ Mill Slot ☐ Key Punc		auze Wrapped				ne (Open H		Other (Specify)			
										ft., From	f	t. to ft.	
										ft., From			
9 GROUT	MATERIA	L: 🗌 Neat	cement] Cement grou	ut 🗌 B	entonite	Ot	her					
				ft., From		ft. to		ft., From		ft. to	ft.		
Nearest sour		le contaminati	i on: Lateral Line	x □ F	Pit Privy		Пι	livestock Pe	ne	Insectici	ide Stor	rana	
			Cess Pool		Sewage La	igoon		Fuel Storage					
Waterti	ght Sewer Li	nes 🗌	Seepage Pit		Feedyard			Fertilizer Sto					
☐ Other (Specify) Direction from well? ft.													
10 FROM	TO TO		LITHOLO		ce from w	FRC		ТО		HO. LOG (cont.) or	PLUG	CINC INTERVALS	
IU PROM	10	1		51C L06		TRU		10			LUU	JING INTERVALS	
						N T 4							
	Notes:												
						_							
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													
under the business name of													
-	nent of Health a	and Environment	t, Bureau of V							eka, Kansas 66612-1367			
Visit us at h	ttp://www.kdhe	eks.gov/waterwei	ll/index.html									KSA 82a-1212	