

		RECORD		WWC-5	,	0107		sion of Wate			XX7 11 TT			
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction						Resources App. No. Section Number			Well ID Township Number Range Number					
$\begin{array}{c c} I & LOCATION OF WATER WELL: \\ County: & 1/4 & 1/4 & 1/4 \end{array}$						4 ¹ /4								
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and														
	Business: dir								rection from nearest town or intersection): If at owner's address, check here:					
Address:														
Address: City:														
3 LOCATE WELL														
	WITH "X" IN 4 DEPTH OF COMPLETED WELL:													
	ECTION BOX: Depth(s) Groundwater Encountered: 1) N (2) ft. 3) ft., or 4)									e:				
N	N 2) II. 3) II., 01 4) WELL'S STATIC WATER LEVEL:									WGS 84 NAE		NAD 27		
	X		below land surface, measured on (mo-day-yr)							Latitude/Longitude: unit make/model:)		
NW		above l	above land surface, measured on (mo-day-yr)							WAAS enabled?				
	Pump test data: Well water was								□ Land Survey □ Topographic Map					
W	E	after	after hours pumping gr Well water was ft.						nline	e Mapper:				
SW	SE	after	after hours pumping											
			Estimated Yield:gpm					6 Elevation:ft. Ground Level						
	S		Bore Hole Diameter: in. to				and <u>Source</u> : Land Survey GI							
1 r			in. to					. Other						
7 WELL WATER TO BE USED AS:														
1. Domestic:														
	☐ Household 6. □ Dewatering: how many wells? . □ Lawn & Garden 7. □ Aquifer Recharge: well ID									\square Uncased \square C				
										al: how many bores				
2. 🗌 Irrigati	— 6									Loop 🗌 Horizonta				
3. 🗌 Feedlo	3. 🗌 Feedlot 🗌 Air Sparge 🗌 Soil Vapor Ex									Loop 🔲 Surface Dis				
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														
Casing height above land surface														
	TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Fiberglass PVC Other (Specify)													
SCREEN OR PERFORATION OPENINGS ARE:														
	nuous Slot	☐ Mill Slot		auze Wrap						Other (Specify)				
		Key Puncl												
										ft., From				
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. to ft.														
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other														
		ble contaminati		, 1 1011				, 1 10111						
Septic '			Lateral Line	es [Pit Privy			Livestock Pe		Insectic				
Sewer 1			Cess Pool		Sewage L	agoon	□ F	Fuel Storage		Abando				
	ight Sewer L	ines 🔲 S	Seepage Pit	L	Feedyard		🗆 F	Fertilizer Sto	orage	🗌 Oil Wel	l/Gas We	211		
Other (Specify) Direction from well? ft.														
10 FROM	TO		ITHOLO			FRO				HO. LOG (cont.) or		ING INTERVALS		
						Notes								
						Trotes	•							
11 CONT	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged													
under my ju	urisdiction	and was compl	leted on (n	no-day-ye	ear)		and th	his record i	is tru	e to the best of my	y knowle	edge and belief.		
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)														
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.														
KS Departr	nent of Health	and Environment	, Bureau of V	Vater, Geolo	bgy Section, 1	000 SW Jac	kson S	St., Suite 420,	Tope	eka, Kansas 66612-136	7. Telepho	one 785-296-3565.		
-		neks.gov/waterwel							_			KSA 82a-1212		