WATER WELL R	ECORD Form \ Correction			vision of Water ources App. No.		Vell ID	
1 LOCATION OF W	ATER WELL:	Fraction		ction Number	Township Number	Range Number	
County: Klno NWNENWA 35 T22 S ROBIERW							
2 WELL OWNER: Last Name Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:							
Address: 12 PQJUD PIQUE							
City: Hutchinson State: V ZIP: 67.602							
3 LOCATE WELL	4 DEPTH OF COM		32 0	5 Latitude	· ·		
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered: 1)				5 Latitude:		
N 2)							
	below land surface, measured on (mo-day-yr)				r Latitude/Longitude: (unit make/model:)	
NWNE	above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)		
W E	Pump test data: Well water was ft. after hours pumping 5 gpm				☐ Land Survey ☐ Topographic Map ☐ Online Mapper:		
SW SE	Well water was ft.						
SW SE	Estimated Vield	after hours pumping gpm Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC		
S	S Bore Hole Diameter: in. to ft. and			Source: Land Survey GPS Topographic Map			
1 mile in. to ft.							
1. Domestic: 5. Public Water Supply: well ID							
Household	☐ Household 6. ☐ Dewatering: how many wells?				11. Test Hole: well ID		
Livestock	★Lawn & Garden 7. Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?		
2. Irrigation	☐ Irrigation 9. Environmental Remediation: well ID				a) Closed Loop		
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Recovery	☐ Soil Vapor F ☐ Injection	Extraction	b) Open . 13. □ Other	Loop Surface Dischar (specify):	ge Inj. of Water	
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:							
Water well disinfected? Yes \(\subseteq \text{No} \)							
8 TYPE OF CASING USED: ☐ Steel → PVC ☐ Other							
Casing diameter							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)							
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							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.							
Nearest source of possible contamination:							
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well							
Watertight Sewer Lines							
Other (Specify) Direction from well? Distance from well? ft.							
10 FROM TO	LITHOLOGIC		FROM		HO. LOG (cont.) or PLUC	GING INTERVALS	
0 5	slack Top	5p:\					
5 10 6	tick and w	MENERY					
0 00 7	ea 5 26 a	Thrus					
	· · · · · · · · · · · · · · · · · · ·	V-0 -					
			Notage				
Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) \ \text{O.c.} \ \tex							
Kansas Water Well Contractor's License No. 1.5							
Mail 1 white conv along	with a fee of \$5.00 for each co	onstructed well to: Kana	S.T. Sign	Ature Health and Enviro	onment Rureau of Water CV	VTS Section	
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.							
Visit us at http://www.kdheks.go	//waterwell/index.html	K	SA 82a-1212		Rev	rised 7/10/2015	