

W			RECORD		WWC-5 1089			ion of Wate						
1	Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction						rces App. N		Township Number	Well ID	ge Number			
I	LOCATION OF WATER WELL: County: ^{1/4}					1/4	Section Number Township Number 1/4 T S			R R	$\Box E \Box W$			
2			Last Name:		First:		eet or Rural Address where well is located (if unknown, distance and							
-	Business: Address: Address:		Lust rume.	1 1150.	direction from nearest town or intersection): If at owner's address, check here:									
	City:	City: State: ZIP:												
3	LOCAT		4 DEPTH	OF COM	IPLETED WELL: .		ft	ft. 5 Latitude :(decimal degrees)						
		CTION BOX:						Longitude:						
	SECHO			2) ft. 3) ft., or 4) 🗌 Dry Well					Datum: 🗌 WGS 84 🔲 NAD 83 🔲 NAD 27					
		WELL'S STATIC WATER LEVEL: ft							Source for Latitude/Longitude:					
		, measured on (mo-day-			$\Box \text{ GPS (unit make/model:)}$									
	NW	NE		☐ above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
W		I		after hours pumping					Online Mapper:					
	X SW	· ·		Well water was ft.										
	3w	3E		after hours pumping gpm Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC					
		 S			gpm in. to ft. and			Source: Land Survey GPS Topographic Map						
	، l1 n	-	Dole Hole L		in. to ft.									
7	7 WELL WATER TO BE USED AS:													
1. Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease														
	House				g: how many wells?									
	_	Lawn & Garden 7. Aquifer Recharge: well ID												
		Livestock8. Monitoring: well IDIrrigation9. Environmental Remediation: well ID												
	☐ Feedlo		Air Sparge	Extraction		a) Closed Loop								
4.	🗌 Industr	ial		Recovery	□ Injection			13. Other (specify):						
W	Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:													
	Water well disinfected? \Box Yes \Box 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													
1	TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Fiberglass PVC Other (Specify)													
	Brass Galvanized Steel Concrete tile None used (open hole)													
SC	SCREEN OR PERFORATION OPENINGS ARE:													
	Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)													
50			Key Punch		n ft. to			ne (Open H	/		ft to	£,		
50					n ft. to									
9					Cement grout Be									
					ft., From									
Ne	earest sou	rce of possi	ible contaminati	on:										
				ateral Line				ivestock Pe				37 11		
	Sewer I Waterti	ght Sewer 1		Cess Pool leepage Pit	☐ Sewage La ☐ Feedyard	goon		uel Storage ertilizer Sto		☐ Abandon ☐ Oil Well		well		
			·····					ertilizer St	ладе		Gas wen			
					Distance from we	ell?				ft.				
10	FROM	TO	L	ITHOLOG	GIC LOG	FROM	M	TO	LIT	HO. LOG (cont.) or H	PLUGGIN	G INTERVALS		
						+								
			+			1								
			1											
			1											
						Notes	:							
4.4														
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) and this record is true to the best of my knowledge and belief.														
K	ansas Wa	ter Well C	ontractor's Lice	ense No.		ater Well	Reco	rd was con	mple	ted on (mo-dav-ve	ar)			
Kansas Water Well Contractor's License No														
	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.													
	-		h and Environment, heks.gov/waterwel		valer, Geology Section, 10	JUU SW Jac	KSOR SI	i., Suite 420,	rope	xa, naiisas 00012-136/.		A 82a-1212		
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