

		RECORD		WWC-5	J			sion of Wate			W-11 T	D	
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction							Resources App. No. W Section Number Township Number				Well I	Range Number	
County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$							$\begin{array}{c c} 1 \\ 1 \\ 4 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\$						
2 WELL		Last Name:		First:		Street or	Rura	al Address	whe	re well is located			
								rection from nearest town or intersection): If at owner's address, check here:					
Address: Address:													
City:		State:	ZIP:										
3 LOCATI	E WELL	4 DEDTU		IDI ETE	D WELL.		ft	5 T a 444				(1 . 11)	
	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)												
	SECTION BOX: 2) ft. 3) ft., or 4) \Box												
	WELL'S STATIC WATER LEVEL:						ft. Source for Latitude/Longitude:						
			 below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr) 					□ G		unit make/model:			
NW	NE		Pump test data: Well water was ft.					······· (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			No)		
w	E	-	after hours pumping										
SW	· · · ·		Well water was ft.					Online Mapper:					
	3E		after hours pumping					6 Eleva	Elevation:ft. Ground Level TOC				
			Estimated Yield:gpm Bore Hole Diameter:in. to										
1 m		Doire Hole I	in. to										
7 WELL WATER TO BE USED AS:													
1. Domestic:	: well ID												
	Household 6. Dewatering: how many wells?												
Lawn &	Lawn & Garden 7. Aquifer Recharge: well ID Livestock 8. Monitoring: well ID									al: how many bores			
2. \Box Irrigatio										Loop Horizonta			
_ 0	3. □ Feedlot □ Air Sparge □ Soil Vapor Ex							b) Oj	pen l	Loop 🗌 Surface Dis	scharge	Inj. of Water	
4. Industrial Recovery Injection 13. Other (specify):													
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:													
		? 🗌 Yes 🔲											
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	Brass Galvanized Steel Concrete tile None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:													
	uous Slot	☐ Mill Slot ☐ Key Puncl		auze Wrap						Other (Specify)	•••••		
										ft., From	ft	to	
										ft., From			
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
		ole contaminati		-	ם <u>יי</u> ם ד		— 1	·			.1 .0.		
□ Septic 7 □ Sewer I			Lateral Line Cess Pool	S L	Pit Privy Sewage L	agoon		ivestock Pe Juel Storage		☐ Insectic ☐ Abando			
			Seepage Pit	: E	Feedyard	agoon		Vertilizer Sto	orage				
□ Other (Specify)													
										ft.			
10 FROM	TO	I	ITHOLO	GIC LOG		FROM	М	TO	LľI	HO. LOG (cont.) or	PLUGG	ING INTERVALS	
	Notes:												
11 CONT				CEDTI	TICATIO	N. This -		T	-				
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.													
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 Departm	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed 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.												
-		neks.gov/waterwel				200 D TT Such		, Sance 720,	- opt			KSA 82a-1212	