

M	_		RECORD		n n C-3	2836		sion of Wate					
	Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction						Resources App. No.			Well ID			
I			WATER WEL	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	4 1/4	Section Number			Township NumberRange NumberTSRR \Box EN		$\Box E \Box W$		
2	County WFLI	OWNER:	Lost Nama:		First:		treet or Rural Address where well is located (if unknown, distance and						
4	Business:	11181.	direction from nearest town or intersection): If at owner's address, check here:										
	Address:					uncention					5 4441 655,		
	Address:			State:	ZIP:								
3	City: LOCAT	F WFLL											
5	WITH "			IPLETED WELL:							-		
	SECTIO		Depth(s) Gr										
	Ν	$\begin{array}{c} 2) \dots \\ \text{WELL'S STATIC WATER LEVEL:} \\ \end{array}$								WGS 84 🔲 NAE		AD 27	
					, measured on (mo-day	y-yr)		Source for Latitude/Longitude:					
					measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ☐ No)					
					vater was ft. s pumping gpm			Land Survey Topographic Map					
W	Well w				vater was				Online Mapper:				
					pumping gpm								
		Estimated Yield:			e1			6 Elevation:ft. Ground Level TOC					
					in. to ft. and			Source: Land Survey GPS Topographic Map Other					
1 mile in. to ft. Other													
	WELL WATER TO BE USED AS: Domestic: 5. Public Water Supply: well ID												
	House												
	🗌 Lawn 🎖			echarge: well ID			Cased Uncased Geotechnical						
	Livesto			g: well ID al Remediation: well I					al: how many bores				
	☐ Irrigati ☐ Feedlo		D Extraction		a) Closed Loop								
	Industr			Air Sparge Recovery		Extraction	13. Other (specify):						
W	as a chei	mical/bact	eriological san	nple subm		Yes 🗆	No	If ves. date	e san	nple was submitted	d:		
	Was a chemical/bacteriological sample submitted to KDHE? □ Yes □ No If yes, date sample was submitted:												
8	TYPE O	F CASIN	G USED: 🗆 S	teel 🗌 PV	C 🗌 Other	C	ASIN	G JOINTS	5: 🗆	Glued Clamped	U Welde	d 🗌 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 Fiberglass PVC Other (Specify)													
Brass Galvanized Steel Concrete tile None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE:													
		nuous Slot	☐ Mill Slot							Other (Specify)			
50		red Shutter	☐ Key Puncl	ned ∐W	Tire Wrapped S	aw Cut		one (Open H	lole)	A E	£	c.	
30					n ft. to n ft. to								
9					Cement grout \square B								
					ft., From								
		-	ble contaminati		_								
	Septic '			Lateral Line				livestock Pe					
	□ Sewer I □ Waterti			Cess Pool Seenage Pit	□ Sewage La □ Feedyard			Fuel Storage Fertilizer Sto		☐ Abando ☐ Oil Wel			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)													
Di	rection fro	om well?			Distance from w	vell?							
10	FROM	TO	I	ITHOLOG	GIC LOG	FRO	M	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
			+										
			1										
			<u> </u>			Notes	s:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged													
					o-day-year)								
Ka	ansas Wa	ter Well C	ontractor's Lice	ense No	This W	ater Wel	Reco	ord was con	mplet	ted on (mo-day-ye	ear)	-	
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 Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.												
	-		heks.gov/waterwel					,	r×		-	SA 82a-1212	