

WATER WELL R		orm WWC				ion of Wate			Wall II			
Original Record Correction Change 1 LOCATION OF WATER WELL:			ge in Well Use Fraction			Resources App. No. Section Number		Township Number		Well ID Range Number		
					1 0				$\Box E \Box W$			
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and												
						irection 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:				. ft.							
SECTION BOX:	Depth(s) Groundwater Encountered: 1)				Longread (decimal degrees)							
Ν	2) ft. 3) ft., or 4) □ I WELL'S STATIC WATER LEVEL:									NAD 27		
	below land					S (unit make/model:)						
NW NE	above land surface, measured on (mo-day-yr).					(WAAS enabled? □ Yes □ No)						
	Pump test data: Well water was ft.					□ Land Survey □ Topographic Map						
W E	after	after hours pumping gpm						Online Mapper:				
SWSE	Well water was ft. after hours pumping											
	Estimated Yield		6 Elevation:ft. Ground Level TOC									
S	Bore Hole Diameter: in. to ft					Source: Land Survey GPS Topographic Map						
1 mile	in. to ft.					□ Other						
7 WELL WATER TO BE USED AS:												
1. Domestic:	5. Public Water Supply: well ID											
☐ Household ☐ Lawn & Garden	6. Dewatering: how many wells?					11. Test Hole: well ID ☐ Cased ☐ Uncased ☐ Geotechnical						
Livestock	7. Aquifer Recharge: well ID							al: how many bores				
2. Irrigation	9. Environmental Remediation: well ID											
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Extra					a) Closed Loop						
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? Ves 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 ft.												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Fiberglass Fiberglass Other (Specify)												
Steel Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole)												
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 ft. to ft., From ft. to ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Nearest source of possible		ft., Fr	om	. ft. to		. It., From	•••••	It. to	ft.			
Septic Tank		ral Lines	🗌 Pit Privy		ΠLi	ivestock Per	ns	□ Insectio	cide Stora	ge		
Sewer Lines	Cess		Sewage L	agoon		uel Storage						
Watertight Sewer Lin	les 🗌 Seep	age Pit	Feedyard		🗌 Fe	ertilizer Stor	rage					
□ Other (Specify)												
Direction from well? Distance from well 10 FROM TO LITHOLOGIC LOG					FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS							
10 FROM TO		IULUGIC LU	JG	FROM	1	10	LH	HO. LOG (cont.) or	PLUGGI	ING INTERVALS		
					+							
				Notes:								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 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 Con	tractor's License	e No	This W	ater Well l	Recor	rd was con	nple	ted on (mo-day-ve	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.												