

		RECORD		WWC-5 1063			ion of Wate						
	Original Record Correction Change LOCATION OF WATER WELL:						sources App. No.			Well ID			
County							$\begin{array}{c c} T & S \\ T & S \\ \end{array} R \square E \square W$						
2 WELL		Last Name:		First:		Rura	1 Address	whe	re well is located (i				
Business: Address: Address:	ness: dire						rection from nearest town or intersection): If at owner's address, check here:						
City:		State: ZIP:											
3 LOCAT		4 DEPTH	IPLETED WELL: .		ft.	5 Latitude:(decimal degrees)							
WITH "	X″ IN DN BOX:		Depth(s) Groundwater Encountered: 1) ft.						e:				
	N DOM.		2) ft. 3) ft., or 4) $\Box$ Dry Well						Datum: WGS 84 NAD 83 NAD 27				
	WELL'S STATIC WATER LEVEL: ft.							Source for Latitude/Longitude:					
			above land surface, measured on (mo-day-yr)					□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)					
N <b>%</b>	NE		Pump test data: Well water was ft.					□ Land Survey □ Topographic Map					
w	I	after	after hours pumping gpm					Online Mapper:					
SW	SE		Well water was ft.										
			after hours pumping gpm Estimated Yield:gpm					6 Elevation:ft.  Ground Level  TOC					
	S		Bore Hole Diameter: in. to ft. and					Source:  Land Survey  GPS  Topographic Map					
1 r	nile		in. to ft.					☐ Other					
7 WELL WATER TO BE USED AS:													
1. Domestic													
	Household       6. □ Dewatering: how many wells?         Lawn & Garden       7. □ Aquifer Recharge: well ID								Iole: well ID sed □ Uncased □ Geotechnical				
									al: how many bores?				
2. Irrigati		9. Environmental Remediation: well ID							Loop 🗌 Horizontal				
3. 🗌 Feedlo							b) Open Loop 🗌 Surface Discharge 📋 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:													
Water well disinfected?  Yes 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 in. Weight lbs./ft. Wall thickness or gauge No													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
$\Box \text{ Steel}  \Box \text{ Stainless Steel}  \Box \text{ Fiberglass}  \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots \dots$													
Brass Galvanized Steel Concrete tile None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE:													
	nuous Slot	☐ Mill Slot							Other (Specify)	•••••			
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From													
				1 ft. to									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
	-	ible contaminati							<b>—</b>				
Septic Sewer			Lateral Line Cess Pool		goon		ivestock Pe uel Storage		☐ Insecticie ☐ Abandor				
				☐ Sewage La ☐ Feedyard	goon		ertilizer Sto						
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)													
				Distance from w					ft.				
10 FROM	TO	I	ITHOLOG	GIC LOG	FROM	1	TO	LIT	HO. LOG (cont.) or I	PLUGGIN	G INTERVALS		
		1											
		1			1								
		<u> </u>											
		Notes:											
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> 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 Contractor's License No													
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		, and, Geology Stelloll, 10	Job D II Jaci		., 5uite 420,	, rope	nu, muisas 00012-1307		SA 82a-1212		