

W	_		RECORD	-	WWC-5 1269	DI	vision of Wa			Well ID			
1	Original Record Correction Change LOCATION OF WATER WELL:				e in Well Use Fraction	ources App.	ion Number Township Numbe			ge Number			
I	County:							bel	T S	R R	$\Box E \Box W$		
2		OWNER: I	ast Name:				ural Address	s whe		tted (if unknown, distance and			
-	Business:	0 11 1210				direction from nearest town or intersection): If at owner's address, check here:							
	Address:	Address:											
	Address: City:			State:	ZIP:								
3	LOCAT	E WELL											
•	WITH "				IPLETED WELL: .		5 Latitude:(decimal degrees)						
	SECTIO				Encountered: 1)			Longitude:(decimal degrees) Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27					
	Ν	1	2) ft. 3) ft., or 4) Dry ' WELL'S STATIC WATER LEVEL:					Source for Latitude/Longitude:					
		V	below la	below land surface, measured on (mo-day-yr)					unit make/model:)		
	NW	NE		above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
			~	Pump test data: Well water was ft.									
W		E	alter	after hours pumping gpm Well water was ft.									
	SW	SE	after	s pumping									
				Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC					
					in. to		Sour		□ Land Survey □ GPS □ Topographic Map □ Other				
					in. to								
	7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease												
	□ Housel				g: how many wells?								
	Lawn & Garden 7. Aquifer Recharge: well ID								Uncased G				
	Livestock 8. Monitoring: well ID						12. Geo	therm	al: how many bores?	?			
	☐ Irrigation 9. Environmental Remediation: well ID								Loop 🗌 Horizonta				
	☐ Feedlo			Air Sparge	-		b) Open Loop \Box Surface Discharge \Box Inj. of Water						
	4. Industrial Recovery Injection 13. Other (specify):												
Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box 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 ft., Diameter ft., Diameter ft., Diameter ft., Diameter ft., Diameter													
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
	□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)												
Brass Galvanized Steel Concrete tile None used (open hole)													
50	SCREEN OR PERFORATION OPENINGS ARE:												
	□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)												
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.													
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.													
					Cement grout 🛛 Be								
					ft., From	ft. to	ft., Fron	1	ft. to	ft.			
	arest sou	-	le contaminati	o n: Lateral Line	es 🗌 Pit Privy	Г] Livestock P	ens	🗌 Insectici	ide Storage			
	Sewer I			Cess Pool	Sewage Lag		Fuel Storag				Well		
	Waterti	ght Sewer Li			E Feedyard		Fertilizer St						
	🗌 Other (Specify)							-				
	rection fro FROM	m well? TO		ITHOLOG	Distance from we	FROM			ft. HO. LOG (cont.) or l	DI LICCIN	CINTEDVALS		
10	FROM	10	<u> </u>	IIIIOLOG	JIC LUG	FROM	10		HO. LOG (cont.) of I	PLUGGIN	JINTERVALS		
							ļ						
						N - 4 -							
		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 Contractor's License No This Water Well Record was completed on (mo-day-year)													
under the business name of													
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.													
	-		Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										