

M	_		RECORD		•••••	9398		sion of Wate						
			Correction					well ID Well ID				NT 1		
I	LOCATION OF WATER WELL: County:				Fraction Sector $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$			ion Number Township Number Range Number T S R \Box E \Box W						
2		OWNER: 1	lost Nama		74 74 7 First:		5 Street or Rural Address where well is located							
4	Business:		Last Name:		F1rst:		tion from nearest town or intersection): If at owner's address, check her							
	Address:					direction	i oni ne	carest town o	1 miles	section). If at owner	s address,			
	Address:			a										
2	City:			State:	ZIP:									
3	LOCAT				IPLETED WELL: ft.			5 Latitude :						
	SECTIO			Encountered: 1)			Long	itud	e:		(decimal degrees)			
	N			3) ft., or 4)		ell	Datum: 🗌 WGS 84 🔲 NAD 83 🔲 NAD 27							
				WELL'S STATIC WATER LEVEL: ft. below land surface, measured on (mo-day-yr)					Source for Latitude/Longitude: GPS (unit make/model:) (WAAS enabled? Yes No) Land Survey Topographic Map					
	NIW	NE		above land surface, measured on (mo-day-yr)										
	NW	X		Pump test data: Well water was ft. after hours pumping gpm										
W		E	after							e Mapper:				
	SW	SE	6	Well water was ft.										
	1			after hours pumping gpm					6 Elevation:ft. Ground Level TOC					
		 S		Estimated Yield:gpm Bore Hole Diameter:in. to ft. and					Source: Land Survey GPS Topographic Map					
	1 n		Doite Hole D	in. to ft.										
7 WELL WATER TO BE USED AS:														
										10. Oil Field Water Supply: lease				
	Housel			6. Dewatering: how many wells?										
	🗌 Lawn &				echarge: well ID				Uncased C					
	🗌 Livesto				D ation: well ID				12. Geothermal: how many bores? a) Closed Loop					
2. Irrigation9. Environment3. FeedlotAir Sparg							b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water							
4. Industrial Recovery Injection 13. Other (specify):														
W	Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:													
	Water well disinfected? \Box Yes \Box No													
8	TYPE O	F CASING	G USED: 🗆 St	teel 🗌 PV	C 🗌 Other	C.	ASIN	G JOINTS	S: 🗆	Glued Clamped	U Weldee	1 🗌 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														
T	TYPE OF SCREEN OR PERFORATION MATERIAL:													
Steel Stainless 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)													
	Louve	red Shutter	🗌 Key Punch	ed 🗌 W	vire Wrapped S	aw Cut	🗌 No	one (Open H	Hole)					
SC					n ft. to									
					n ft. to									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other														
			II. to de contaminatio		π., From	. II. IO		π., From		It. to	п.			
	Septic '			ateral Line	es 🗌 Pit Privy		ПΙ	livestock Pe	ens	☐ Insectic	ide Storage			
	Sewer I			Cess Pool	Sewage La	agoon		Fuel Storage		☐ Abando		Well		
		ght Sewer L					🗆 F	Fertilizer Sto	orage	🗌 Oil Wel	ll/Gas Well			
					Distance from a					•				
	FROM	TO		ITHOLO	Distance from w	FRO		ТО		π. HO. LOG (cont.) or		GINTERVALS		
10	TROM	10	L	molo				10			Leoon	SINTERVILS		
						_								
						N T. 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														
under the business name of														
]	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.													
	-		eks.gov/waterwell		'				-			A 82a-1212		