

WATER WELL R		WWC-5 1316	D	ivision of Wate			
Original Record Correction Chang LOCATION OF WATER WELL:				sources App. N ection Numbe		Well ID Per Range Number	
County:					T S	$\begin{array}{c c} R & \square E \square W \\ \end{array}$	
2 WELL OWNER: L	ast Name:	First:	Street or R	et or Rural Address where well is located (if unknown, distance and			
				lirection from nearest town or intersection): If at owner's address, check here:			
Address:							
Address: City:	State:	ZIP:					
3 LOCATE WELL				_			
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)						
SECTION BOX:	2) ft. 3) ft., or 4) \Box I			Long	Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27		
N		TER LEVEL: \dots			n: 📋 WGS 84 🛛 NA		
		, measured on (mo-day-				<u>.</u>)	
NW NE	above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)		
	Pump test data: Well water was ft. after hours pumping				□ Land Survey □ Topographic Map		
W E				□ 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:	ft. and	Source	Source: Land Survey GPS Topographic Map			
1 mile		in. to	ft.		☐ Other		
7 WELL WATER TO BE USED AS:							
1. Domestic:	 Dublic Water Supply: well ID Dewatering: how many wells? 				10. ☐ Oil Field Water Supply: lease 11. Test Hole: well ID		
Lawn & Garden	6. □ Dewaterin 7. □ Aquifer R			\Box Cased \Box Uncased \Box Geotechnical			
	8. 🗌 Monitorin			12. Geothermal: how many bores?			
2. Irrigation	9. Environment)	a) Cl	a) Closed Loop [] Horizontal [] Vertical			
3. 🗌 Feedlot	Air Sparge Soil Vapor Extr				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? 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 in. to ft. 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)							
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. to ft. to ft.							
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.							
Nearest source of possible contamination:							
□ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage							
Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well							
□ Other (Specify)							
Direction from well? Distance from well							
10 FROM TO	LITHOLO	GIC LOG	FROM	ТО	LITHO. LOG (cont.) o	r PLUGGING 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 Contractor's License No This Water Well Record was completed on (mo-day-year)							
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.							
Visit us at <u>http://www.kdheks.gov/waterwell/index.html</u> KSA 82a-1212							