

		RECORD		n n C-3	0989		ion of Wate					
Original Record Correction Change in Well						rces App. N			Well ID			
1 LOCATION OF WATER WELL:				Fraction	/ 1/	Secti	-		Township Number	•		
County				4 <sup>1</sup> /4	D							
Business: Address: Address:						Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:						
City:												
3 LOCAT WITH "		<b>IPLETED WELL:</b>	LETED WELL: ft.			5 Latitude:(decimal degrees)						
	N BOX:	<b>OX</b> . Depth(s) Groundwater Encountered: 1)					Longitude:(decimal degrees)					
	N	2) ft. 3) ft., or 4) □ Dry Well WELL'S STATIC WATER LEVEL: ft.					Datum	n: 🗌	WGS 84 🗌 NAD	<b>b</b> 83	NAD 27	
						Source for Latitude/Longitude:						
NW	NE		<ul> <li>below land surface, measured on (mo-day-yr)</li> <li>above land surface, measured on (mo-day-yr)</li> </ul>					□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)				
NW	NE		Pump test data: Well water was ft.					□ Land Survey □ Topographic Map				
w	E	-	after hours pumping gpm						Mapper:			
SW	SE		Well water was ft.									
			after hours pumping gpm Estimated Yield:gpm					6 Elevation:ft.  Ground Level  TOC				
			Hole Diameter: in. to						Land Survey GPS Topographic Map			
1 r	-		in. to				□ Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:       5. <ul> <li>Public Water Supply: well ID</li> </ul>							10. Oil Field Water Supply: lease					
				Dewatering: how many wells?				1. Test Hole: well ID				
Livesto			arge: well ID				al: how many bores					
2. $\Box$ Irrigati									Loop Loop Horizonta			
3. 🗌 Feedlo	e 🗌 Soil Vapor						e 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:												
□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)												
Brass Galvanized Steel Concrete tile None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
	nuous Slot	☐ Mill Slot							Other (Specify)	•••••		
	$PERFOR \Delta T$		leu ∐w	ire Wrapped S	aw Cui ft F		ft to	1010)	ft From	ft t	o ft	
				n ft. to								
				Cement grout B								
				. ft., From	. ft. to		ft., From		ft. to	ft.		
	-	ole contaminatio				<b>—</b> •						
Septic '			ateral Line Cess Pool	s 🗌 Pit Privy 🗌 Sewage L	20001		ivestock Pe uel Storage		☐ Insectic ☐ Abando			
			eepage Pit				ertilizer Sto					
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)												
Direction from well? Distance from well?							ft.					
10 FROM	TO	L	ITHOLOG	GIC LOG	FRO	M	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	IG INTERVALS	
					-							
					-							
					Note	s:						
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												
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											SA 82a-1212	