

W	_		RECORD	-	WWC-5 1269			ion of Wate			Well ID		
1	Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction					Resources App. No. Section Number				Township Number Range Number			
1	County		1/4 1/4 1/4					$\begin{array}{c c} T & S \\ T & S \\ \end{array} \begin{array}{c} T & B \\ R & \Box E \\ \Box W \end{array}$					
2	WELL Business: Address: Address: City:	OWNER:		treet or Rural Address where well is located (if unknown, distance and irection from nearest town or intersection): If at owner's address, check here:									
3	LOCAT	E WELL		State:	ZIP:		-						
-	WITH "	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)							5 Latitude:(decimal degrees)				
W	SECTIO NW	1	2) WELL'S ST below la above la Pump test da after	B) ft., or 4) □ Dry Well TER LEVEL: ft. measured on (mo-day-yr) measured on (mo-day-yr) rater was ft. pumping gpm yater was ft.			Longitude:						
		X		after hours pumping gpm Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC				
					in. to ft. and			Source: Land Survey GPS Topographic Map					
	1 mile				in. to ft.			Other					
		WELL WATER TO BE USED AS:											
2. 3.	Domestic: Housel Lawn & Livesto Feedlo	nold & Garden ock on t	6. [_ 7. [_ 8. [_ 9. Er	 5. Dublic Water Supply: well ID 6. Dewatering: how many wells? 7. Aquifer Recharge: well ID 8. Monitoring: well ID 9. Environmental Remediation: well ID 1. Air Sparge Soil Vapor Ext 				 10. Oil Field Water Supply: lease 11. Test Hole: well ID Cased Uncased Geotechnical 12. Geothermal: how many bores? a) Closed Loop Horizontal Vertical 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. to in. Weight lbs./ft. Wall thickness or gauge No. ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. ft. TYPE OF SCREEN OR PERFORATION MATERIAL:													
9					Cement grout Be								
Gı	out Interv	als: From .	ft. to		ft., From								
Nearest source of possible contamination: Image: Septic Tank Image: Lateral Lines Pit Privy Image: Livestock Pens Image: Image: Septic Tank 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) Distance from well? Distance from well? ft.													
	FROM	TO		ITHOLOG		FRON				HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
10		10			510 100	TRON	-	10				G HTTERTALD	
							-+						
							-+						
						Notes:							
						indles:	•						
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 constructed well.													
	-				Vater, Geology Section, 10	000 SW Jack	cson St	., Suite 420,	Tope	ka, Kansas 66612-1367	-		
	Visit us at <u>h</u>	ttp://www.kdł	neks.gov/waterwel	l/index.html							KS	SA 82a-1212	