

W	_		RECORD		W W C-3	9436		ion of Wate					
1	- 0		Correction				irces App. No.			Well ID			
I	LOCATION OF WATER WELL: County:				$\frac{1}{4} \frac{1}{4} \frac{1}{4} \frac{1}{4}$	4 1/4	ion Numbe	n Number Township Numb T S		er Range Number $R \square E \square W$			
2		OWNER:	Last Name [.]		First:	-	et or Rural Address where well is located (if unknown, dis						
-	Business:			1 1150.		direction from nearest town or intersection): If at owner's address, check here:							
	Address:												
	Address: City:			State:	ZIP:								
3	LOCAT	E WELL											
e	WITH "				IPLETED WELL: ft. Encountered: 1) ft.			5 Latitude:(decimal degrees)					
	SECTIO						Longitude:						
	Ν	1		3) ft., or 4) TER LEVEL:					WGS 84 INAL Latitude/Longitude:		AD 27		
			below la	below land surface, measured on (mo-day-yr)					GPS (unit make/model:)	
	NW	NE		above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
			-	Pump test data: Well water was ft. after hours pumping gpm									
W		E	alter		Well water was ft.			Online Mapper:					
	SW	SE	after	after hours pumping gpm									
		х		Estimated Yield:gpm				6 Elevation:ft. □ Ground Level □ 7 Source: □ Land Survey □ GPS □ Topographic					
	-	S silo	Bore Hole D	bre Hole Diameter: in. to f									
Image:													
	7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease												
	House				g: how many wells?			11. Test Hole: well ID					
	Lawn &				echarge: well ID								
			g: well ID			othermal: how many bores?							
	☐ Irrigati ☐ Feedlor	al Remediation: well I											
	Industr			Air Sparge Recovery				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 CASINO	G USED: 🗆 St	teel 🗌 PV	C 🗌 Other	C	ASIN	G JOINTS	:	Glued Clamped	U Welde	d 🗌 Threaded	
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.													
Casing height above land surface													
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Fiberglass PVC Other (Specify)													
Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole)													
SC	SCREEN OR PERFORATION OPENINGS ARE:												
	Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)												
0.0								one (Open H			C	C.	
50					n ft. to								
Q					$\frac{1}{2} \dots \dots$								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
			ole contaminatio					,					
	Septic 7			ateral Line				ivestock Pe					
	Sewer I Watarti			Cess Pool	□ Sewage La □ Feedyard			uel Storage		Abando			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)													
					Distance from w		<u></u> .						
10	FROM	ТО		ITHOLOG	GIC LOG	FRO	М	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
						_							
						-							
						1							
						Notes	5:						
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.													
	-		and Environment, neks.gov/waterwell		ater, Geology Section, I	JUU D W JAG	.42011 21	., Suite 420,	rope	na, maiisas 00012-130	-	SA 82a-1212	