

				WWC-5 1269			ion of Wate			Well ID		
Original Record       Correction       Change in Well Use         1       LOCATION OF WATER WELL:       Fraction						Resources App. No. Section Number			Township Number Range Number		ge Number	
County: 1/4 1/4					1⁄4					$\Box E \Box W$		
2 WELL OWNER: Last Name: First: St							treet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:					
2	TE WELL											
	WITH "X" IN 4 DEPTH OF COMPLETED WELL:											
X NW - W	SECTION BOX:       N         N       Depth(s) Groundwater Encountered: 1)         2)						Vell       Datum: □ WGS 84 □ NAD 83 □ NAD 27         t.       Source for Latitude/Longitude:          □ GPS (unit make/model:			IAD 27 ) Io)		
	S			in. to ft. and			Source:  Land Survey  GPS  Topographic Map					
				in. to ft.								
7 WELL 1. Domesti House Lawr	ELL WATER TO BE USED AS:         mestic:       5. □ Public Water Supply: well ID         Household       6. □ Dewatering: how many wells?         Lawn & Garden       7. □ Aquifer Recharge: well ID         Livestock       8. □ Monitoring: well ID         Irrigation       9. Environmental Remediation: well ID .         Feedlot       □ Air Sparge       □ Soil Vapor Exception					·····	<ul> <li>10. Oil Field Water Supply: lease</li> <li>11. Test Hole: well ID</li> <li>Cased Uncased Geotechnical</li> <li>12. Geothermal: how many bores?</li> <li>a) Closed Loop Horizontal Vertical</li> <li>b) Open Loop Surface Discharge Inj. of Water</li> <li>13. Other (specify):</li> </ul>					
Was a chemical/bacteriological sample submitted to KDHE? $\Box$ Yes $\Box$ No If yes, date sample was submitted:												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Casing diameter												
				Cement grout 🛛 🛛 Be								
				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)       Other (Specify)       Sever Storage       Storage       Storage												
				Distance from w	1					DILICON	CINTEDVALS	
10 FROM	ТО	L	ITHOLOG	JIC LUG	FROM	VI	10	LIT	HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
					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)												
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.												
-	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											