

W		WELL			Form			1030		sion of Wat			Well ID		
1	Original Record Correction Change Correction Change Correction					e in Well Use Fraction			Resources App. No. Section Number		1			ge Number	
T	County:					1/4 1/4 1/4 1/4							$\Box E \Box W$		
2	WELL OWNER: Last Name: Business: Address: Address:					direction from				ral Address where well is located (if unknown, distance and nearest town or intersection): If at owner's address, check here:					
-	City:				State:	ZIP:									
3	LOCAT WITH "			4 DEPTH OF COMPLETED WELL:					ft.	5 Latit	5 Latitude:(decimal degrees)				
		Depth (s) Groundwater				Encountered: 1)				Longitud		e:(decimal degrees)			
	N			2) ft. 3) ft., or 4) \Box Dry Well WELL'S STATIC WATER LEVEL: ft.						Datum: 🗌 WGS 84 🔄 NAD 83 📄 NAD 27					
				below land surface, measured on (mo-day-yr)								Latitude/Longitude		、 、	
NWNE				above land surface, measured on (mo-day-yr)						□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)					
				Pump test data: Well water was ft.							□ Land Survey □ Topographic Map				
W	WE			after hours pumping								e Mapper:			
	sw- x	SE		Well water was ft. after hours pumping gpm											
				Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC					
		s		Bore Hole Diameter: in. to ft. at					ł	Source: Land Survey GPS Topographic Map					
	1 n					i	n. to		□ Other						
7 WELL WATER TO BE USED AS:															
	Domestic:			 5. Dublic Water Supply: well ID 6. Dewatering: how many wells? 							10. ☐ Oil Field Water Supply: lease 11. Test Hole: well ID				
				7. Aquifer Recharge: well ID							□ Cased □ Uncased □ Geotechnical				
	Livesto			8. Monitoring: well ID							12. Geothermal: how many bores?				
	Irrigati			9. Environmental Remediation: well ID							a) Closed Loop 🗌 Horizontal 🗌 Vertical				
	☐ Feedlo ☐ Industr			☐ Air Sparge ☐ Soil Vapor Ext ☐ Recovery ☐ Injection					on		b) Open Loop □ Surface Discharge □ Inj. of Wate 13. □ Other (specify):				
			4				-		7						
				Yes	-	iiiea io	KDHE!	I Yes] NO	II yes, dat	e san	nple was submitte	d:		
							1er	(CASIN	IG IOINTS	s. □	Glued Clamped	□ Welde	d □ Threaded	
												in. to			
												or gauge No			
T				PERFORA											
	□ Steel			ss Steel	☐ Fiber □ Conc		\square PVC		l 1 -)		her (S	Specify)	•••••		
SC	Brass			ized Steel FION OPE			□ None	used (ope	en noie)					
5		nuous Slot] Mill Slot		auze Wra	pped 🗌 🗍	Corch Cut	🗌 Dr	rilled Holes		Other (Specify)			
	Louve	red Shutter	r [Key Puncl	ned 🗌 W	ire Wrap	ped 🗌 S	aw Cut	\square No	one (Open H	Hole)				
SC												ft., From			
0												ft., From			
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other															
				contaminati						11., 110111			11.		
	Septic '	Tank			Lateral Line		🗌 Pit Privy			Livestock Pe		Insection			
	Sewer l		. .		Cess Pool		Sewage L			Fuel Storage			oned Water	Well	
		ight Sewer			Seepage Pit		Feedyard			Fertilizer Sto	orage		ll/Gas Well		
												ft.			
10	FROM	TO		Ι	ITHOLO	GIC LOO	Ĵ	FRO	DM	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
			_												
			_												
									Notes:						
14	CONTR	DACTOT				OPP				. 11	_				
												Instructed, \Box reconstructed for the best of m			
K	ansas Wa	ter Well C	Contr	actor's Lice	ense No	y-uay-y	This W	ater We	ll Reco	ord was con	mple	ted on (mo-day-ye	ear)		
			ame c	of											
	KS Departs	nent of Haal										or each <u>constructed</u> we ka, Kansas 66612-136		785-206-3565	
				Livitonnelli		, a.c.i, OCO	issy section,		aerson c	5, 15uno 420,	, rope			103-290-3303.	