

M	_		RECORD		WWC-5 1311			ion of Wate						
1		Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction					Resources App. Section Numb							
T	County		1/4	-				$\Box E \Box W$						
2	WELL Business: Address:		Last Name:	First:	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:									
	Address: City:													
3	LOCAT	E WELL												
		4 DEPTH OF COMPLETED WELL Depth(s) Groundwater Encountered: 1)						5 Latitude:(decimal degrees) Longitude:(decimal degrees)						
	SECTIO N] Dry W€		Datum: WGS 84 NAD 83 NAD 27								
		WELL'S STATIC WATER LEVEL:							Source for Latitude/Longitude:					
	1			□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)										
	NW	NE		Description above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.					\Box Land Survey \Box Topographic Map					
W			after		s pumping gpm			Online Mapper:						
	SW	SE	after		vater was f	er was ft. Imping gpm								
			Estimated Y		gpin	6 Elevation:ft. Ground Level TOC								
	2	in. to			Source: Land Survey GPS Topographic Map									
	1 n		TO DE LISED		in. to	ft.	. ft. 🗌 Other							
	7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease													
	House		6. 🗌	6. Dewatering: how many wells?						well ID				
	_	Lawn & Garden 7. 🗌 Aquifer Recharge: well ID												
		Livestock 8. Monitoring: well ID Irrigation 9. Environmental Remediation: well ID												
	☐ Feedlo		Air Sparge				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:													
			$d? \square Yes \square$		C D Other	C	ACINI	C IONTS	·.		Walda	d 🗖 Threadad		
	8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to													
Ca	Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No													
T	TYPE OF SCREEN OR PERFORATION MATERIAL:													
	Steel Stainless 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)													
50					'ire Wrapped ☐ Sa			ne (Open H	,		ft to	£4		
30														
9	GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other													
					ft., From	ft. to		ft., From		ft. to	ft.			
	arest sou	-	ible contaminati	o n: Lateral Line	es 🗌 Pit Privy			ivestock Pe	ens	☐ Insectici	de Storage			
	Sewer I	Lines		Cess Pool	☐ Sewage La	igoon	□ F	uel Storage	;	Abandor				
		ght Sewer	Lines 🗆 S	Seepage Pit	Feedyard		🗆 F	ertilizer Sto	orage	🗌 Oil Well	/Gas Well			
					Distance from w					ft.				
	FROM	ТО		ITHOLO		FRO		ТО	LIT	HO. LOG (cont.) or H	PLUGGIN	G INTERVALS		
						_								
						Notes	•							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)														
Ka	ansas Wa	ter Well C	ontractor's Lice	ense No	This Wa	ater Well	Reco	rd was con	mple	ted on (mo-day-yea	ar)			
Kansas Water Well Contractor's License No														
	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed 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.													
	-		lheks.gov/waterwel									SA 82a-1212		