

WATER WELL R		1000-3	312			on of Wate					
Original Record Correction Chang LOCATION OF WATER WELL:		nge in Well Use				Resources App. 1					
1LOCATION OF WATER WELL: County:Fraction1/41/41/4											
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and											
Business:	ast ivanic.	1 1131.							address, check here:		
Address:											
Address:											
City: 3 LOCATE WELL	State:	ZIP:									
WITH "X" IN	4 DEPTH OF COMPLETED WELL:				ft.	5 Latitude :					
SECTION BOX:	Depth(s) Groundwater Encountered: 1)					Longitude:(decimal degrees)					
N	2) ft. 3) ft., or 4) \Box Di					Datum: 🗌 WGS 84 🔄 NAD 83 🔄 NAD 27					
	WELL'S STATIC WATER LEVEL:					Source for Latitude/Longitude:			、 、		
	above land surface, measured on (mo-day-yr).					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)					
NW NE	Pump test data: Well water was ft.					Land Survey Topographic Map					
W XE	after hours pumping gpm										
SW SE		Well water was ft.									
	after hours pumping gpm					6 Elevation:ft. Ground Level TOC					
S	Estimated Yield:gpm Bore Hole Diameter:in. to ft. :					Source: Land Survey GPS Topographic Map					
1 mile	in. to ft.										
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease								e			
☐ Household	6. Dewatering: how many wells?					11. Test Hole: well ID					
Lawn & Garden	7. 🗌 Aquifer Recharge: well ID					Cased Uncased Geotechnical					
	8. Monitoring: well ID							al: how many bores?.			
 2. ☐ Irrigation 3. ☐ Feedlot 	9. Environmental Remediation: well ID Air Sparge Soil Vapor Extra				••	a) Closed Loop					
4. Industrial	□ Air Sparge □ Soil Vapor Extracti □ Recovery □ Injection					13. ☐ Other (specify):					
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 in. to ft., Diameter in. to ft., Diameter ft.											
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)											
Brass Galvanized Steel Concrete tile None used (open hole)											
SCREEN OR PERFOR					יי ת		_	0.1 (0 :0)			
Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. to ft. to ft.											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible											
Septic Tank	Lateral Li		ivy			vestock Pe					
Sewer Lines		Sewa	ge La	agoon		el Storage			ed Water Well		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)											
Direction from well?											
10 FROM TO	LITHOL			FROM					LUGGING INTERVALS		
├ ─── ├				NT /							
<u>├</u> ──── <u>├</u>	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) 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									
under the business name	<u>e of</u>		• • • • • •			<u></u>					
under the business name KS Department of Health a	Send one copy to WATER	WELL OWNER and a	retain	one for your 1	records	s. Fee of \$5	5.00 f	or each constructed well.			