

W				-	W W C-3	9996		sion of Wat			Well ID		
1		Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction					Resources App. No. Section Number			Township Number Range Number			
T	LOCATION OF WATER WELL:FractionCounty: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$											$\Box E \Box W$	
2	,	· OWNER:	I ast Name		First:		eet or Rural Address where well is located (if unknown, distance and						
-	Business: Address: Address:			irection from nearest town or intersection): If at owner's address, check here:									
•	City:												
3	LOCAT WITH "		OF COM	IPLETED WELL:		ft.	5 Latit	ude:			(decimal degrees)		
	SECTIO		Depth(s) Gr						e:				
	N			3) ft., or 4)			Datur	n: 🗌	WGS 84 🛛 NAD	83 🗌 1	NAD 27		
			ATIC WA					Latitude/Longitude:					
	NW	, X		 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) Pump test data: Well water was ft. after hours pumping				□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)					
	INW	NE						\Box Land Survey \Box Topographic Map					
W									Online Mapper:				
	SW	- SW SE often hours numering											
	5,,	I	after Estimated Y		s pumping	. gpm		6 Eleva	ation	ı:ft.	Ground	1 Level □ TOC	
	<u> </u>	 S			gpm in. to	ft and					Land Survey 🔲 GPS 🗌 Topographic Map		
	-	1 mile in. to											
7	7 WELL WATER TO BE USED AS:												
	Domestic:						eld Water Supply: lea						
	Housel			6. Dewatering: how many wells?					11. Test Hole: well ID				
	Lawn a	Lawn & Garden7.											
		Investock 8. Involutioning: weil ID Irrigation 9. Environmental Remediation: well ID								Loop 🗌 Horizonta			
	$B. \square$ Feedlot \square Air Sparge \square Soil Vapor I						· •						
4.	🗌 Industr	ial		Recovery	□ Injection			13. 🗌 Other (specify):					
W	Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
			d? 🗌 Yes 🔲										
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												
1	□ Steel □ 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) □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)												
50					\square s \square s \square s			· (· I ·	,		ft to	£4	
50													
9	GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. o ft. o ft. o ft. o ft. to ft. to ft. o ft. to ft. to ft. o ft. o ft. o ft. ft. to ft. o ft. o ft. ft. o ft. ft. o ft. ft. ft. ft. ft. ft. ft. ft. ft.												
	Grout Intervals: From												
			ble contaminati							— - · · ·			
	□ Septic ′ □ Sewer I			Lateral Line Cess Pool				ivestock Pe fuel Storage		☐ Insectici ☐ Abandor			
		ght Sewer I		Seepage Pit	☐ Sewage L ☐ Feedyard	agoon		ertilizer Sto					
								ertilizer St	Jiage		Joas wen		
		m well?			Distance from v					ft.			
10	FROM	TO	I	ITHOLOG	GIC LOG	FRC	DM	ТО	LIT	HO. LOG (cont.) or l	PLUGGIN	G INTERVALS	
						Note	otes:						
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) and this record is true to the best of my knowledge and belief.													
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)													
under the business name of													
	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.												
	-		heks.gov/waterwel									SA 82a-1212	