

		RECORD	-	WWC-5		8422		sion of Wate						
Original Record Correction Change in Well Us 1 LOCATION OF WATER WELL: Fraction				se				rces App. No.			Well ID Range Number			
					1/4 1	4 1/4					R R	$\Box E \Box W$		
County: 1/4 1/4 1/4 T S R 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, d														
							irection from nearest town or intersection): If at owner's address, check here:							
Address:	uii uii													
Address:														
City:			State:	ZIP:				1						
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:							ft.	5 Latiti	nde.			(decimal degrees)		
			Encountered				Longitude:(decimal degrees)							
SECHO	N BOX:) ft., or 4) 🗌 I				Datum: WGS 84 NAD 83 NAD 27							
	· · · · · · · · · · · · · · · · · · ·	WELL'S S	WELL'S STATIC WATER LEVEL:					ft. Source for Latitude/Longitude:						
			below land surface, measured on (mo-day-yr)							unit make/model:)		
NW	NE	above land surface, measured on (mo-day-yr)												
		-	Pump test data: Well water was ft.					□ Land Survey □ Topographic Map						
W	E	after	after hours pumping					□ Online Mapper:						
SW	SE	after	Well water was ft. after hours pumping											
			Estimated Yield:gpm					6 Elevation:ft. Ground Level				nd Level 🔲 TOC		
	s		Bore Hole Diameter: in. to				and <u>Source</u> : Land Survey GPS To			Copographic Map				
1 r	nile		in. to											
7 WELL WATER TO BE USED AS:														
1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 														
☐ House	☐ Household 6. ☐ Dewatering: how many wells?									Test Hole: well ID				
🗌 Lawn d			7. 🗌 Aquifer Recharge: well ID						Cased Uncased Geotechnical					
Livesto										al: how many bores				
	. Irrigation 9. Environmental Remediation: well ID .									Loop Horizonta				
	3. 🗌 Feedlot 🔅 🗋 Air Sparge 🔅 Soil Vapor E						n	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:														
		? 🗌 Yes 🔲												
										Glued Clamped				
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.														
	Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No													
	TYPE OF SCREEN OR PERFORATION MATERIAL:													
Steel Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole)														
Brass		ATION OPE				used (ope	n noie)							
	nuous Slot	☐ Mill Slot		auze Wrapp	ad □ T	orch Cut		illed Holes		Other (Specify)				
		☐ Key Punc						one (Open H			• • • • • • • • • • • • • • •			
										ft., From	ft. t	o ft.		
										ft., From				
										ft. to				
		le contaminati		, .				, .						
□ Septic	Tank		Lateral Line		Pit Privy			Livestock Pe		Insectici				
Sewer			Cess Pool		Sewage L			Fuel Storage		Abandon Abandon				
	ight Sewer Li		Seepage Pit		Feedyard		🗆 F	Fertilizer Sto	orage	🗌 Oil Well	l/Gas Wel	1		
										C.				
					ince from v					ft. HO. LOG (cont.) or 2				
10 FROM	TO	1	LITHOLO	GIULUG		FRC	IVI	10	LII	HU. LUG (cont.) or	PLUGGII	NG INTERVALS		
						Note	s•							
							3.							
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														
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.														
				water, Geolog	y Section, 1	000 SW Ja	ckson S	st., Suite 420,	Tope	ka, Kansas 66612-1367				
V1sit us at h	<u>ttp://www.kdh</u>	eks.gov/waterwe	<u>11/1ndex.html</u>								K	SA 82a-1212		