

				35´		ivision of Wa			W-II ID		
Original Record Correction Changer I LOCATION OF WATER WELL:			hange in Well Use	Fraction				Township Numbe	Well ID	nge Number	
County:							Section Number Township Nu T		$S R \square E \square W$		
2 WELL Business: Address: Address: City:	OWNER: L	ast Name: State:	First: ZIP:		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:					n, distance and	
3 LOCAT	E WELL										
WITH "A" IN Depth(s) Groundwater				IPLETED WELL: Encountered: 1) ft.			5 Latitude:(decimal degrees) Longitude:(decimal degrees)				
W SW	NE SE	4. 3) ft., or WATER LEVEL: face, measured on (mo face, measured on (mo ell water was hours pumping hours pumping	3)ft., or 4) □ Dry Well TER LEVEL:ft. e, measured on (mo-day-yr) , measured on (mo-day-yr) , measured on (mo-day-yr) vater wasft. s pumping gpm vater wasft. s pumping gpm			Doignate:					
S Bore Hole Dian			er: in. to								
1 mile in. to ft. Uther 7 WELL WATER TO BE USED AS:											
1. Domestic: 5. □ Public Water Supply: well ID □ Household 6. □ Dewatering: how many wells? □ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. □ Monitoring: well ID 2. □ Irrigation 9. Environmental Remediation: well II 3. □ Feedlot □ Air Sparge □ Soil Vapor 4. □ Industrial □ Recovery □ Injection					D	. 11. Tes 12. Geo a) b)	 10. Oil Field Water Supply: lease 11. Test Hole: well ID Cased Ducased Geotechnical 12. Geothermal: how many bores? a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water 13. Other (specify): 				
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:											
Was a chemical bacteriological sample submitted to \mathbf{KDHE} ? \Box Yes \Box No \Box 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 in. to ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel Brass Galvanized Steel Concrete tile None used (open hole) 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) SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.											
Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well Other (Specify) Distance from well? Distance from well? ft.											
10 FROM	TO	LITHO	LOGIC LOG		FROM	TO	LI	THO. LOG (cont.) or	PLUGGI	IG INTERVALS	
						1					
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)											
KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 783-296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212											