

	WELL R		WWC-5 1271	DI	vision of Wate			
Original Record Correction Change     I LOCATION OF WATER WELL:						inces App. No. Well ID Well ID Communication Number Township Number Range Number		
County:								
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business:		ast i vanie.		direction from nearest town or intersection): If at owner's address, check here:				
Address:								
Address: City:		State:	ZIP:					
3 LOCAT	E WELL							
WITH "X" IN 4 DEPTH OF COL			<b>IPLETED WELL:</b> ft			5 Latitude:(decimal degrees)		
SECTIO				Encountered: 1) ft. ) ft., or 4) □ Dry Well		Longitude:(decimal degrees)		
N	1		ELL'S STATIC WATER LEVEL:			Datum: 🗌 WGS 84 🔲 NAD 83 🗌 NAD 27		
		below land surface			Source for Latitude/Longitude:			
NWNE W		$\square$ above land surface						
		Pump test data: Well w		🗆 La				
		after hours		Online Mapper:				
SW	SE	Well wafter						
		Estimated Yield:	gpin	6 Elevation:ft.  Ground Level  TOC				
S		Bore Hole Diameter:	ft. and	A <u>Source</u> : ☐ Land Survey ☐ GPS ☐ Topographic Map				
1 n			ft.					
7 WELL WATER TO BE USED AS:								
1. Domestic:		5. 🗌 Public Wa						
☐ Housel ☐ Lawn &		6. Dewaterin						
			echarge: well ID g: well ID			12. Geothermal: how many bores?		
2. 🗌 Irrigati								
3.  Feedlor		e 🗌 Soil Vapor H			b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water			
4. 🗌 Industr	ial	Recovery		13. 🗌 Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE?  Yes No If yes, date sample was submitted:								
Water well disinfected? $\Box$ Yes $\Box$ No								
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								
TYPE OF SCREEN OR PERFORATION MATERIAL:         Steel       Fiberglass         PVC       Other (Specify)								
□ 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 ft. to ft., From ft. to ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Nearest source of possible contamination:								
Septic 7		Lateral Line	es 🗌 Pit Privy		Livestock Per	ns 🗌 Insecti	cide Storage	
□ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well								
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well								
Direction from well? ft.								
10 FROM	TO	LITHOLO		FROM			r PLUGGING INTERVALS	
							~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
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					<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 b	usiness name	Send one conv to WATER W	ELL OWNER and retain o	ne for your re	cords. Fee of \$5	00 for each constructed we		
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.								
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212								