

	WELL R		WWC-5 ¹¹⁴⁸	DI	vision of Wate				
Original Record Correction Change 1 LOCATION OF WATER WELL:						rces App. No. Well ID Well ID On Number Township Number Range Numbe			
County:					Section Number To		$\begin{array}{c c} R & \square E \square W \\ \end{array}$		
County: 1/4 1/4 1/4 T 2 WELL OWNER: Last Name: First: Street or Rural Address where well is loc									
					rection from nearest town or intersection): If at owner's address, check here:				
Address: Address:									
City: State: ZIP:									
3 LOCATE WELL									
WITH "Y" IN 4 DEPTH OF COMPL						5 Latitude:(decimal degrees)			
	SECTION BOX: N Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4				Longitude:				
Ν	J		TER LEVEL:			Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:			
			, measured on (mo-day-				<u>.</u>)		
X '	NE	above land surface	above land surface, measured on (mo-day-yr			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			
		-	Pump test data: Well water was ft.						
W	E		after hours pumping gr Well water was ft.			Online Mapper:			
SW	SE		after hours pumping						
			nated Yield:gpm			6 Elevation:ft. Ground Level TOC			
	S		in. to	ft. and	Source	Source: Land Survey GPS Topographic Map			
1 n	1		in. to ft.						
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. Public Water Supply: well ID 6. Dewatering: how many wells? 									
			echarge: well ID			\Box Cased \Box Uncased \Box Geotechnical			
	□ Livestock 8. □ Monitoring: well ID								
2. □ Irrigation 9. Environmental Remediation:									
3. 🗌 Feedlot 🗌 Air Sparge				Extraction		b) Open Loop 🗌 Surface Discharge 📋 Inj. of Water			
4. 🗌 Industr	4. Industrial Recovery Injection 13. Other (specify):								
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:									
Water well disinfected? Yes 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 in. Weight lbs./ft. Wall thickness or gauge No									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
$\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ Fiberglass} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots \dots$									
☐ 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. to ft. to									
GRAVEL PACK INTERVALS: From									
Grout Intervals: From									
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)									
Direction from well? ft.									
10 FROM	TO	LITHOLO		FROM			r PLUGGING INTERVALS		
				Notes:	1				
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 This Water Well Record was completed on (mo-day-year)									
							ear)		
		Send one copy to WATER W	/ELL OWNER and retain	one for your re	cords. Fee of \$5	.00 for each constructed we	ell.		
-				000 SW Jackso	n St., Suite 420,	Topeka, Kansas 66612-136	67. Telephone 785-296-3565.		
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212									