

W		WELL F		-	WWC-5		8100		sion of Wate						
	Original Record Correction Change in V								rces App. No. Well ID				N 1		
I	1 LOCATION OF WATER WELL: County:				FractionSec $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$			Sect	ion Number Township Number Range Number T S R \square E \square W						
2								treet or Rural Address where well is located (if unknown, distance and							
4	Business:								direction from nearest town or intersection): If at owner's address, check here:						
	Address:										section). If at owner	s address,			
	Address:														
2	City:	City: State: ZIP: LOCATE WELL 4 DEDTH OF COMPLETED WELL													
5		WITH "X", IN 4 DEPTH OF CON				IPLETED WELL: ft.				5 Latitude:(decimal degrees)					
	SECTIO		Depth(s) Groundwater Encountered: 1)						Longitude:						
	Ν	N 2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL:											NAD 27		
			below land surface, measured on (mo-day-yr)						Source for Latitude/Longitude:						
		NE - X		above land surface, measured on (mo-day-yr)						(WAAS enabled? Yes No)					
			Pump test data: Well water was ft.						□ Land Survey □ Topographic Map □ Online Mapper:						
W		E	after hours pumping gpm												
	SW	SE	- f t	Well water was ft.											
	 	1		after hours pumping gpm Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC						
	<u> </u>	5			in. to ft. and				Source: Land Survey GPS Topographic Map						
		1 mile in. to							□ Other						
7 WELL WATER TO BE USED AS:															
	1. Domestic: 5. Public Water Supply: well ID 								10. 🗌 Oil Field Water Supply: lease						
	House			6. Dewatering: how many wells?							well ID				
	Lawn &			7. 🗌 Aquifer Recharge: well ID 8. 🗌 Monitoring: well ID					Cased Uncased Geotechnical 12. Geothermal: how many bores?						
2	Livesto														
	☐ Feedlo			9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Ext					a) Closed Loop 🔲 Horizontal 🗌 Vertical b) Open Loop 🔲 Surface Discharge 🔲 Inj. of V						
	Industr			Recovery					13. Other (specify):						
W	as a chei	nical/bacte	riological sam	nle subm		-	lYes □	No			nple was submitte				
			' □ Yes □ Ì					110	11 yes, aux	o ban		a			
					C 🗌 Other .		C	ASIN	G JOINTS	: 🗆	Glued Clamped	l 🗌 Welde	d 🗌 Threaded		
											in. to				
							lbs	./ft.	Wall thick	cness	or gauge No				
T	TYPE OF SCREEN OR PERFORATION MATERIAL:														
	□ Steel		nless Steel	☐ Fiber	0		1.7			ner (S	specify)	•••••			
50	Brass Galvanized Steel Concrete tile None used (open hole)														
50	SCREEN OR PERFORATION OPENINGS ARE:														
			Key Punch												
SC	CREEN-P	ERFORAT	ED INTERVA	LS: Fron	1 ft.	. to	ft., F1	om	ft. to	э	ft., From	ft. to	ft.		
	G	RAVEL PA	CK INTERVA	LS: Fron	1 ft	. to	ft., F1	om	ft. to	o	ft., From	ft. to	ft.		
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other															
					. ft., From		. ft. to		ft., From		ft. to	ft.			
	earest sou	-	le contaminatio	o n: ateral Line	s nr	Pit Privy		Пι	Livestock Pe	ns	☐ Insectio	ide Storage			
	Sewer I			less Pool		Sewage L	agoon		Fuel Storage						
	U Waterti	ght Sewer Li	nes 🗌 S	eepage Pit	🗆 F	Feedyard			Fertilizer Sto						
	Other (Specify)								0					
						ce from v					ft.		a		
10	FROM	TO	L	ITHOLOG	HC LOG		FRO	IVI	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	GINTERVALS		
									Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or a plugged															
ur V	ansas Wa	IFISCICTION a	nu was comple	tted on (n	io-day-year))) This W	ater Wall	and the	nis record i	is tru	e to the best of my ted on (mo-day-ye	y knowled	ge and belief.		
ur	ider the b	usiness nam	e of			····· ····				e					
			Send one copy to	WATER W	ELL OWNER	and retain	one for you	ir recor	ds. Fee of \$5	5.00 fe	or each constructed we	11.			
	KS Departn	nent of Health	and Environment,	Bureau of V	Vater, Geology	Section, 1	000 SW Jac	ckson S	St., Suite 420,	Tope	ka, Kansas 66612-136		e 785-296-3565.		