

	WELL R		WWC-5 1249	DI	vision of Water			
Original Record       Correction       Change         1       LOCATION OF WATER WELL:						ion Number   Township Number   Range Number		
County:					Section Number         Township Number <sup>1</sup> / <sub>4</sub> T         S		$R \square E \square W$	
	OWNER: L	ast Name:	First:		et or Rural Address where well is located (if unknown, distance and			
					irection from nearest town or intersection): If at owner's address, check here:			
Address: Address:								
City: State: ZIP:								
3 LOCATE WELL								
WITH "X" IN 4 DEPTH OF COM			<b>IPLETED WELL:</b> ft.			5 Latitude:(decimal degrees)		
SECTION BOX: N Depth(s) Groundwater Encountered: 1 2) ft. 3) ft.,								
1	J			FER LEVEL: ft.		Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:		
			☐ below land surface, measured on (mo-day-yr			PS (unit make/model:	)	
NW	NE	above land surface	yr)		(WAAS enabled? [] Yes [] No)			
		Pump test data: Well w			Land Survey Topographic Map			
W X	E	after hour		🗆 Or	Online Mapper:			
SW	SE		Well water was ft. after hours pumping gpm					
			nated Yield:gpm			6 Elevation:ft.  Ground Level  TOC		
			in. to	ft. and	Source	Source:  Land Survey  GPS  Topographic Map		
1 r			in. to	ft.		□ Other		
7 WELL WATER TO BE USED AS:								
1. Domestic:       5. □ Public Water Supply: well ID         □ Household       6. □ Dewatering: how many wells?								
			echarge: well ID			11. Test Hole: well ID		
						ermal: how many bores?.		
			al Remediation: well II			a) Closed Loop $\Box$ Horizontal $\Box$ Vertical		
3. 🗌 Feedlot 📃 Air Sparg			e 🗌 Soil Vapor I		b) Op	b) Open Loop 🗌 Surface Discharge 📋 Inj. of Water		
4. Industrial Injection I3. 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								
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. or ft. to ft. from ft. to ft. or ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. f								
Grout Intervals: From								
Nearest source of possible contamination:								
□ Septic		🗌 Lateral Line			Livestock Per			
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		LITHO. LOG (cont.) or Pl	LUGGING INTERVALS	
					+			
					+ +			
				Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged								
under my ju	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							
	usiness naine	Send one copy to WATER W	VELL OWNER and retain	one for your re	cords. 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								