

M	_		RECORD	-	•• •• C-3	354	DIV	vision of Wat					
1	Original Record Correction Chang				e in Well Use Fraction		Resources App. No. Section Number		Township Numbe	Well ID	nge Number		
T	County:					$\begin{array}{c c} 1 \\ 1 \\ 1 \\ 1 \\ 4 \end{array} \begin{array}{c} 1 \\ 1 \\ 4 \end{array} \begin{array}{c} 1 \\ 4 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \end{array} \begin{array}{c} 1 \\ 1 \end{array} \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \end{array} \end{array} \begin{array}{c} 1 \\ 1 \end{array} \end{array} \end{array} \begin{array}{c} 1 \\ 1 \end{array} \end{array} \end{array} \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \end{array} \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \end{array} \end{array} \end{array} \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \end{array} \end{array} \end{array} \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \end{array} \end{array} \end{array} \end{array} $ \end{array} \end{array} \end{array} \end{array} \end{array} \begin{array}{c} 1 \\ 1 \\ 1 \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \end{array} \\ \end{array} \end{array} \end{array} \end{array}						$\Box E \Box W$	
2		OWNER: 1	Last Name:		First:		Street or Rural Address where well is loca						
_	Business:					irection from nearest town or intersection): If at owner's address, check here:							
	Address:												
	Address: City:			State:	ZIP:								
3	LOCAT	E WELL				1	0						
	WITH "				IPLETED WELL:					c:(decimal degrees)			
	SECTIO						Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27						
	2) ft. 3) ft., or 4) □ WELL'S STATIC WATER LEVEL:								Source for Latitude/Longitude:				
	- NW NE ■ below land surface, measured on (mo-day-y □ above land surface, measured on (mo-day-y Pump test data: Well water was							· 🗌	☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
)						
w		Pump test data: well water was											
vv			untertit		tter was ft.								
	SW	SE		after hours pumping gpm								6 Flow	
		S Estimated Yield:							6 Elevation :ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map				
	1 r												
	7 WELL WATER TO BE USED AS:												
	Domestic:				ter Supply: well ID		10. 🗌 Oil Field Water Supply: lease						
	Housel			how many wells?				11. Test Hole: well ID					
	🗌 Lawn d	•	rge: well ID			Cased Uncased Geotechnical 12. Geothermal: how many bores?							
		☐ Livestock 8. ☐ Monitoring: well ID ☐ Irrigation 9. Environmental Remediation: well ID								Loop Horizonta			
	☐ Feedlo							b) Open Loop 🗌 Surface Discharge 🗌 Inj. of Water					
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 ft.													
Casing height above land surface													
•	□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)												
	Brass Galvanized Steel Concrete tile None used (open hole)												
SC	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)												
SC										ft., From	ft. to) ft.	
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. o ft. o ft. ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft													
					ft., From	ft.	to	ft., From	ı	ft. to	ft.		
	earest sou	-	ole contaminati	o n: Lateral Line	es 🗌 Pit Privy	,		Livestock P	one		ide Storage		
	Sewer I			Cess Pool	\square Sewage			Fuel Storage					
	Waterti	ght Sewer Li	ines 🗆 S	leepage Pit	Feedyare	ł		Fertilizer St					
	Other (Specify)								2			
	rection fro FROM	m well?		ITHOLOG	Distance from	well	? FROM	ТО		HO. LOG (cont.) or	DILICCIN		
10	TROM	10	L		JIC LUG		TROM	10		110. LOG (COIII.) OF	LUGUIN	U INTERVALO	
_													
							Nater						
	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 business name of													
	-		and Environment	Bureau of V						eka, Kansas 66612-1367	7. Telephon		
	Visit us at <mark>h</mark>	ttp://www.kdh	eks.gov/waterwel	/index.html							K	SA 82a-1212	