

	WELL R		WWC-5 1201	Division of Water				W 11 ID				
Original Record Correction Chang 1 LOCATION OF WATER WELL:			e in Well Use Fraction	Resources App. No. Section Number			Township Numb	Well ID	age Number			
County:				1/4 1/4 1/4 1/4 1/4			T S			er Range Number R DE W		
2 WELL OWNER: Last Name:				Address where well is located (if unknown, distance and								
Business:					earest town or intersection): If at owner's address, check here:							
Address:												
Address: City: State:			ZIP:									
2 LOCATE WELL			•									
WITH "X" IN 4 DEPTH OF COM			PLETED WELL: ft.			5 Latitude:(decimal degrees)						
SECTION BOX: Depth(s) Groundwater I			Encountered: 1) ft.			Longitude:(decimal degrees)						
WELL'S STATIC WA				11	Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:							
	TX.		ow land surface, measured on (mo-day-yr)				GPS (unit make/model:)					
NWNE above land surfa			measured on (mo-day-y		(WAAS enabled? ☐ Yes ☐ No)							
1 1 1 1 1 -			rater was ft.		☐ Land Survey ☐ Topographic Map							
			s pumping gpm water was ft.			☐ Online Mapper:						
SW	SE		after hours pumping gpm									
		Estimated Yield:gpm				6 Elevation :ft. ☐ Ground Level ☐ TOC						
S		Bore Hole Diameter: in. to							☐ GPS ☐ Topographic Map			
1 n			in. to ft.				Other					
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID												
Domestic: ☐ Housel												
Lawn &		g: how many wells?echarge: well ID			11. Test Hole: well ID							
			g: well ID			12. Geothermal: how many bores?						
2. ☐ Irrigation 9. Environmenta			al Remediation: well ID			a) Closed Loop						
3. ☐ Feedlot ☐ Air Sparge						b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
4. 🗌 Industr		☐ Recovery	☐ Injection			13. Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected?												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in to the Diameter of the												
Casing diameter												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless 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												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other												
Grout Intervals: From												
Nearest sou	rce of possible	e contamination:										
☐ Septic '		Lateral Line				ivestock Per			cide Storage			
Sewer 1		Cess Pool		oon		uel Storage			oned Water			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)												
Direction from well?												
10 FROM	TO	LITHOLOG		FROM				HO. LOG (cont.) or		G INTERVALS		
				-								
				Notes								
				TAOLES	•							
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)												
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.												
under the b	usiness name	Send one copy to WATER W	ELL OWNER and retain or	ne for you	r record	ls Fee of \$5	00 fo	r each constructed we				
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												