

W	_		RECORD		· · · · C-3	6581		sion of Wate			W-11 ID		
1	Original Record Correction Change LOCATION OF WATER WELL: Image: Contract of the second						rces App. No on Number Township Numb			Well ID er Range Number			
I	County:					1/4 1/4	Secu		T S		$R \square E \square W$		
2		WELL OWNER: Last Name: First:						treet or Rural Address where well is located (if unknown, distance and					
-	Business:			1 1100.		lirection from nearest town or intersection): If at owner's address, check here:							
	Address:											_	
	Address: City:			State:	ZIP:								
3	LOCAT	E WELL											
•	WITH "X" IN 4 DEP			DEPTH OF COMPLETED WELL: epth(s) Groundwater Encountered: 1)					5 Latitude:(decimal degrees)				
	SECTIO		oundwater			Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27							
	Ν	1	Dry w		Source for Latitude/Longitude:								
				below land surface, measured on (mo-day-yr)					$\Box GPS (unit make/model:)$ (WAAS enabled? \Box Yes \Box No)				
	NW	NE		above land surface, measured on (mo-day-yr)									
			Pump test data: Well water was ft.					🗌 La	and S	urvey 🔲 Topogra	phic Map		
W		E	after	after hours pumping gpm Well water was ft.					Online Mapper:				
	SW	X - SE	after	after hours pumping									
				Estimated Yield:					6 Elevation:ft. Ground Level TOC				
	-	S	Bore Hole I	Diameter:	in. to	ft. and		Source: \Box Land Survey \Box GPS \Box Topographic Map					
	1 n	1		in. to ft.			☐ Other						
7 WELL WATER TO BE USED AS:													
	Domestic:			 5. □ Public Water Supply: well ID 6. □ Dewatering: how many wells? 									
	□ Housel			7. Aquifer Recharge: well ID									
		Livestock 8. Monitoring: well ID											
2.	🗌 Irrigati	al Remediation: well											
	☐ Feedlo			Air Sparge Soil Vapor Ext				b) Open Loop 🗌 Surface Discharge 🗍 Inj. of Water					
	4. Industrial Recovery Injection 13. Other (specify):												
	Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box 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:												
	□ 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					1 ft. to						ft. to) ft.	
					n ft. to								
9					Cement grout								
					ft., From	ft. to		ft., From		ft. to	ft.		
			ole contaminati					:		T I - - - - + - - + - - + - + - + - + + - + + + + + + + + + +	: J. Ct		
	□ Septic ' □ Sewer l			Lateral Line Cess Pool	s	agoon		Livestock Per Fuel Storage		☐ Insectic ☐ Abando			
					☐ Feedyard			Fertilizer Stor		☐ Oil Wel			
	🗌 Other (Specify)							0				
							IP ft. FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS						
10	FROM	TO	L	ITHOLOG	FIC LOG	FRC	0M	ТО	LITE	IO. LOG (cont.) or	PLUGGIN	GINTERVALS	
						Note	s:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged													
un	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)													
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. 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.												
	-		eks.gov/waterwel								-	SA 82a-1212	