

WATER			WWC-5 1164	D	vivision of Wate				
Original Record Correction Change I LOCATION OF WATER WELL:					esources App. N				
County:			Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$		Section Number Township Number		$\begin{array}{c c} & \text{Range Number} \\ & R & \square E \square W \end{array}$		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and									
					rection 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 COMPLE				LETED WELL: ft.		5 Latitude:(decimal degrees)			
	SECTION BOX: N Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL:						(decimal degrees)		
N						: □ WGS 84 □ NA			
K T			□ below land surface, measured on (mo-day-yr)			Source for Latitude/Longitude:			
NW	NF		above land surface, measured on (mo-day-yr)			(WAAS enabled? Yes No)			
			Pump test data: Well water was ft.			□ Land Survey □ Topographic Map			
W E		after hours pumping gpn				Online Mapper:			
SW	SE	Well water was ft.							
		after hours pumping gpn Estimated Yield:gpm			6 Eleva	tion :ft	ion:ft. 🔲 Ground Level 🔲 TOC		
	I	Bore Hole Diameter:	ft. and		Source: Land Survey GPS Topographic Map				
1 mile			ft.	Other					
7 WELL WATER TO BE USED AS:									
1. Domestic:	••••••••••••••••••••••••••••••••••••••								
Househ			6. Dewatering: how many wells?			11. Test Hole: well ID			
Lawn &			Recharge: well ID ng: well ID						
2. \Box Irrigatio									
3. □ Feedlot □ Air Sparg						b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water			
4. 🗌 Industrial 🔅 Rec			very 🗌 Injection		13. 🗌 Otl	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 in. Weight lbs./ft. Wall thickness or gauge No									
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 ft. to ft., From ft. to ft. to ft.									
GRAVEL PACK INTERVALS: From									
Grout Intervals: From									
Nearest source of possible contamination:									
Septic T		Lateral Line	es 🗌 Pit Privy		Livestock Per		cide Storage		
Sewer L		Cess Pool	Sewage Lag	goon [Fuel Storage		oned 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			r PLUGGING INTERVALS		
 									
				-	+				
				+	+				
				Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, are constructed, 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 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.									
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212									