

W	_		RECORD	-	WWC-5 1354	1		on of Wate			Well ID		
1		Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction						ces App. Non Numbe		Township Number Range Number			
1	County		1/4 1/4 1/4					T S	R	$\Box E \Box W$			
2	WELL Business: Address: Address: City:	OWNER:		treet or Rural Address where well is located (if unknown, distance and irection from nearest town or intersection): If at owner's address, check here:									
3	LOCAT	E WELL	State:	ZIP:		-							
·		4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)						5 Latitude:					
W	SECTIO NW SW	N NE E	2) WELL'S ST below la above la Pump test da after	ater was ft. pumping gpm pumping gpm pumping gpm pumping gpm			Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27 <u>Source for Latitude/Longitude</u> : GPS (unit make/model:) (WAAS enabled? Yes No) Land Survey Topographic Map Online Mapper:						
	3w	gpm		6 Elevation:ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map									
		S Estimated Yield: Bore Hole Diameter:							gpm in. to ft. and				
	1 n		Dore Hole E	in. to ft.									
7	WELL WATER TO BE USED AS:												
2. 3.	Domestic: Housel Lawn & Livesto Irrigati Feedlo	nold & Garden ock on t	6. [_ 7. [_ 8. [_ 9. Er	 5. Dublic Water Supply: well ID 6. Dewatering: how many wells? 7. Aquifer Recharge: well ID 8. Monitoring: well ID 9. Environmental Remediation: well ID 1. Air Sparge Soil Vapor External Content of the second second				 10. Oil Field Water Supply: lease 11. Test Hole: well ID Cased Ducased Geotechnical 12. Geothermal: how many bores? a) Closed Loop Horizontal Vertical 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													
					Cement grout 🛛 🗍 Be								
					ft., From	ft. to		. ft., From		ft. to	ft.		
Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage 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) Distance from well? Distance from well? ft.													
	FROM	m well? TO		ITHOLOG		FROM				ft. HO. LOG (cont.) or 1	PLUGGIN	GINTERVALS	
10		10	L		510 100	TKOW	L	10		10. LOU (COIII.) OF	LUUUIN	JINIERVALS	
						_							
						Natari							
						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)													
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.												785-296-3565.	
	-		eks.gov/waterwel						P 0	,	-	A 82a-1212	