

		RECORD	-	WWC-5		7076		ion of Wate							
Original Record Correction Change in Well Use					se		Resources App. No. Section Number			Well ID Township Number Range Number					
1 LOCATION OF WATER WELL: Fraction County: 1/4 1/4 1/4						4 14									
										reet or Rural Address where well is located (if unknown, distance and ection from nearest town or intersection): If at owner's address, check here:					
Address:			direction	whom nom nearest town of intersection). If at owner's address, check here.											
Address:															
City:		State:	ZIP:												
	3 LOCATE WELL WITH (W) IN 4 DEPTH OF COMPLETED WELL:								obu			(degimal degrees)			
WITH "			th(s) Groundwater Encountered: 1)						5 Latitude:(decimal degrees) Longitude:(decimal degrees)						
	SECTION BOX: N $2) \dots \dots ft. 3) \dots ft. or 4) \square$							Datum: WGS 84 NAD 83 NAD 27							
	N		WELL'S STATIC WATER LEVEL:							Latitude/Longitude:	05 🗖	MID 21			
			below land surface, measured on (mo-day-yr)							unit make/model:)			
NW	NA		above land surface, measured on (mo-day-yr)					Land Survey Topographic Map							
		-	Pump test data: Well water was ft.												
W	E	after	after hours pumping					☐ Online Mapper:							
SW	SE	ofter	Well water wasft. after hours pumping												
			Estimated Yield:gpm					6 Eleva	Elevation:ft. Ground Level TOC						
	S		Bore Hole Diameter: in. to								GPS 🔲 Topographic Map				
1 n	nile		in. to												
7 WELL WATER TO BE USED AS:															
1. Domestic: 5. Public Water Supply: well ID															
	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID .								
🗌 Lawn d			7. 🗌 Aquifer Recharge: well ID							\Box Uncased \Box G					
	Livestock 8. 🗌 Monitoring: well ID									al: how many bores?					
	2. □ Irrigation 9. Environmental Remediation: well ID.									Loop Horizonta					
	3. 🗌 Feedlot 🔅 🗌 Air Sparge 🔅 Soil Vapor Ez						1	b) Open Loop \square Surface Discharge \square 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:															
		? 🗌 Yes 🔲				~		a							
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														
										(magifu)					
Steel Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole)															
		RATION OPE				useu (oper	(noic								
	nuous Slot	☐ Mill Slot		auze Wrapp	ed 🗆 T	orch Cut	🗆 Dri	illed Holes		Other (Specify)					
		☐ Key Punc						ne (Open H							
						ft., Fr	om	ft. to	э́.	ft., From	ft. t	o ft.			
										ft., From					
										ft. to					
		ole contaminati													
Septic '			Lateral Line		Pit Privy			ivestock Pe		🗌 Insectici					
Sewer l			Cess Pool		Sewage La			uel Storage							
	ight Sewer L		Seepage Pit		Feedyard		ΠF	ertilizer Sto	orage	□ Oil Well	/Gas Wel	l.			
										ft.					
10 FROM	TO		LITHOLO			FRO				HO. LOG (cont.) or 1	PLUGGI	IG INTERVALS			
IV IROM	10					IRO		10			Leoon	I III I III IIII IIII IIII IIIII IIIII IIII			
						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															
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/waterwe		,					r			SA 82a-1212			