

WATER WELL		WWC-5 1201	DIV	vision of Water			
Original Record Correction Chang I LOCATION OF WATER WELL:					rces App. No. Well ID Well ID On Number Township Number Range Number		
County:			Section Number		T S	$\begin{array}{c} \text{Range Number} \\ \text{R} \Box \text{ E} \Box \text{ W} \end{array}$	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and							
Business:				n from nearest town or intersection): If at owner's address, check here:			
Address: Address:							
Address: City: State: ZIP:							
3 LOCATE WELL							
WITH "X" IN	4 DEPTH OF COM		,				
SECTION BOX:	Depth(s) Groundwater 2) ft.		Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27				
Ν		TER LEVEL: \dots			Source for Latitude/Longitude:		
	below land surface, measured on (mo-day-yr				S (unit make/model:)	
NW NE	$NW_{} - NE_{}$ above land surface, measured on (mo-day-yr				(WAAS enabled? ☐ Yes ☐ No)		
	Pump test data: Well water was ft.				□ Land Survey □ Topographic Map		
		after hours pumping gpm Well water was ft.			line Mapper:		
SWSE	after hours pumping gpm						
		Estimated Yield:gpm			6 Elevation:ft. Ground Level TOC		
S		Bore Hole Diameter: in. to f			Source: Land Survey GPS Topographic Map		
	1 mile						
7 WELL WATER TO BE USED AS:							
1. Domestic:	5. 🗌 Public Water Supply: well ID 6. 🔲 Dewatering: how many wells?						
Lawn & Garden		7. Aquifer Recharge: well ID			\Box Cased \Box Uncased \Box Geotechnical		
Livestock	8. 🗌 Monitorir		12. Geothermal: how many bores?				
2. Irrigation	9. Environment		a) Closed Loop 🔲 Horizontal 🗌 Vertical				
3. 🗌 Feedlot	Air Sparge Soil Vapor Extra			b) Open Loop Surface Discharge 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:							
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing 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)							
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., From ft. to ft.							
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 ft. to 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							
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)							
Direction from well?							
10 FROM TO	LITHOLO	GIC LOG	FROM	TO I	LITHO. LOG (cont.) or PI	LUGGING INTERVALS	
			Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a 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 This Water Well Record was completed on (mo-day-year)							
	me of						
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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						