County: Wabuunsee Fraction SW SW NE SW Sec. 10 T 11 S R 10 EM
Owner: Bush, Daniel (to rectify lacking or incorrect information)
Location was listed as:  Section-Township-Range: Set. 10 T115 R10E  Fraction (1/4 1/4 1/4): MA  Location changed to:  Set. 10 T115 R10E  SW SW NE SW
Other changes: Initial statements:
Changed to:
Comments:
Verification method: KGS LEOWEB software, confirmed location using KGS Interactive Mapping tool
Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WELL RECORD Form WWC-5					ision of Water			
Original Record					ources App. No.		Well ID	
1 LOCATION OF W	ATER WE	LL:	Fraction		tion Number	Township Numb	er Range Number	
County: WABU	NSEF	101	5-0-1-1		rol Address w	T // (5)		
2 WELL OWNER: Last Name: Bush First Dawiel Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:								
Address: 35 26 % ) C 99 thy								
Address:	. ,	. ,						
3 LOCATE WELL	~,	•	S ZIP: 66547	1/0/	T	1/100 1/	2160	
WITH "X" IN 4 DEPTH OF COMPLETED WELL: 60 ft. 5 Latitude 1.37 (decimal degrees)								
SECTION BOX:	Deptn(s) G	4 DEPTH OF COMPLETED WELL:						
N	WELL'S S	WELL'S STATIC WATER LEVEL: ft. Source for Latitude/Longitude:						
	below	below land surface, measured on (mo-day-yr)						
NW NE		above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)		
W + E		Pump test data: Well water was ft.  after hours pumping gpm				☐ Land Survey ☐ Topographic Map ☐ Online Mapper:		
'   '			vater was f			ше маррег		
SW SE			s pumping		6 Flavoti	n: 127/ #	Ground Level 🗆 TOC	
	Estimated \	Yield:	9. gpm 9. in. to 160	/ <sub>ft and</sub>	Source:	☐ Land Survey ☐	GPS Topographic Map	
1 mile	Bore riole	manieter	in. to	ft. and ft.				
7 WELL WATER TO	BE USED					***************************************		
1. Domestic:			ater Supply: well ID				ease	
☐ Household			ng: how many wells?			le: well ID		
Lawn & Garden Livestock			echarge: well ID			d Uncased () or mal: how many bores		
2. Irrigation			al Remediation: well II			ed Loop  Horizont		
3. Feedlot		Air Sparge		Extraction	b) Oper	n Loop 🔲 Surface Di	scharge	
4. Industrial		Recovery	☐ Injection		13. 🔲 Othe	r (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 PV	C Other	CASI	NG JOINTS:	Glued Clamped	l □ Welded □ Threaded	
Casing diameter								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
☐ Brass ☐ Galvanized Steel ☐ Concrete tipe ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS SEE.								
SCREEN OR PERFORATION OPENINGS ARE.								
☐ Continuous Slot								
SCREEN-PERFORATED INTERVALS: From 1.40 ft. to 1.60 ft. From ft. to ft. ft. ft. ft. ft. ft. ft. ft								
GRAVEL PACK INTERVALS: From								
O CDOUT MATERIAL.   Nest coment   Coment grout   Department   Other								
Grout Intervals: From								
Septic Tank	ie contaminat	ion: Lateral Line	NONE CLOS	$e_{_{\square}}$	Livestock Pens	□ Insectio	cide Storage	
Sewer Lines	_	Cess Pool	☐ Sewage La		Fuel Storage	_	oned Water Well	
☐ Watertight Sewer Li		Seepage Pit	☐ Feedyard		Fertilizer Stora	ge 🔲 Oil We	ll/Gas Well	
☐ Other (Specify)								
10 FROM TO		LITHOLO		FROM			PLUGGING INTERVALS	
D I	TOU Sai	Z.	GIC LOG	67	79		NV Shill	
1 3	Bhoun	141		78	88	Taustand	y simo	
6 9	Lines Ton	1		88	126	TIN Shall		
9 78	VSVLOW	-Shall	,	136	148	Lin Stool 6	(NATIO)	
28 32	Limista	Ne		144	160	MY DIWS	heto	
32, 51	Brown	Sholl	,	, , ,	100	70.70.	,,, ·	
8/ 54	FIM STO	SNC		Notes:				
Sy 88 Gry Shill								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or plugged								
under my jurisdiction and was completed on (mo-day-year)								
Kansas Water Well Co	ntractor's Lic	ense No		ter Well Red	ord was comp	oleted on (mo-day-ye	ear) 1// 14/2016	
under the business nam	e or	\$5.00 for ea	ch constructed well to: Kar	sas Devartment	of Health and En	viponment Ragge of W	GWT Caction	
1000 SW Jackson S	t., Suite 420. To	peka. Kansas	66612-1367. Mail one to	Water Well Own	ner and retain one	for your records Teleph	none 785-296-5524	
Visit us at http://www.kdhek				KSA 82a-12		Jest records. Teleph	Revised 1/20/2015	