	WELL R			WWC-5		sion of Water	49096			
	Record			ge in Well Use		urces App. No.		Well ID		
1 LOCATION OF WATER WELL: Fraction					1	Section Number Township Number Range Number				
County: Leavenworth NE 1/4 NW 1/4 NE 1/4 S						~~~~~~~~~~~~~~~ <del>~~</del> ~~~~~~~~~~~~~~~~~~~				
2 WELL	OWNER: L	ast Name: BE	LL			eet or Rural Address where well is located (if unknown, distance and				
						irection from nearest town or intersection): If at owner's address, check here:				
Address: 13502 222ND STREET Address:										
City:	LINWOOL	)	State: KS	ZIP: 66052						
3 LOCAT					<i>E7</i> 0		30 0221	03		
	WITH "X" IN  4 DEPTH OF COMPLETED WELL:									
SECTION BOX: Depth(s) Groundwater Encountered: 1)						Longitude: -95.088079 (decimal degrees) Horizontal Datum: □ WGS 84 □ NAD 83 □ NAD 27				
, N	WELL'S STATIC WATER LEVEL: 18						or Latitude/Longitude		3 LI NAD 27	
		below land surface, measured on (mo-day-yr).02/13/2013				Source I	(unit make/model:		)	
NW	NF	above land surface, measured on (mo-day-yr)				(WAAS enabled? \( \subseteq \text{ Yes} \( \subseteq \text{No} \)				
	ī	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W X	E	after	after hours pumpinggpm			Online Mapper: WGS84				
SW SE after			Well water was ft.							
		after hours pumping gpt Estimated Yield:2-3gpm			gpm	6 Elevati	on:fl	. Ground	Level TOC	
	S	Bore Hole Diameter:8.75 in. to57			ft and	and Source: Land Survey GPS Topographic Map				
1 n	-	Boile Hole	in. to ft.			Other				
7 WELL WATER TO BE USED AS:										
1. Domestic:				ater Supply: well ID		10. 🔲 Oil l	Field Water Supply: 1	ease		
	☐ Household 6. ☐ Dewatering: how i			ng: how many wells?	11. Test Hole: well ID					
. —				techarge: well ID						
. —	☐ Livestock 8. ☐ Monitoring: well ID					12. Geothermal: how many bores?				
	2. Irrigation 9. Environmental Remediation: well ID					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
3. Feedlo			Air Sparg		extraction		r (specify):			
4. Industr			Recovery							
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           ft., Diameter        in. to        ft., Diameter         ft., Diameter         ft., Diameter										
Casing diameter										
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: From16										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
☐ Septic		_	Lateral Lind Cess Pool	es ☐ Pit Privy ☐ Sewage La		Livestock Pens Fuel Storage		icide Storage loned Water V	Vall	
			Seepage Pit			Fertilizer Stora		ell/Gas Well	V CII	
☐ Watertight Sewer Lines     ☐ Seepage Pit     ☐ Feedyard     ☐ Fertilizer Storage     ☐ Oil Well/Gas Well       ☐ Other (Specify)     ☐ Oil Well/Gas Well										
Direction from well?										
10 FROM	TO	]	LITHOLO		FROM		ITHO. LOG (cont.) o		INTERVALS	
0		SOIL/CLAY								
19		GRAVEL								
21		IME								
23		SHALE								
30		IME								
33		SHALE								
40		IME			Notes:					
54	57	SHALE								
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) .02/13/20.17 and this record jurisdiction to the best of my knowledge and belief.										
under my ju	urisdiction at	id was comp	leted on (r	no-day-year) .U4(1.3/2	VIII and	this record is	true to the best of m	y knowledg	e and belief.	
under the h	uer well Cor	e of EVANS	ENERG	561	INC Si	oru was comp	neted on (mo-day-	car) .V2/.14/	AV.17	
Mail	white copy alo	ong with a fee of	\$5.00 for ea	ch constructed well to: Kar	sas Department	of Health and Fi	vironment, Bureau of V	Vater, GWTS S	ection.	
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.										
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										