WATER WELL R		WWC-5		ision of Wate				
Original Record		nge in Well Use		ources App. N		Well ID		
1 LOCATION OF W		Fraction	II	ction Numbe			nge Number	
County: Dickinson 4SW 4SW 4			¹ / ₄ NW ¹ / ₄	34 T 13 S R 3 🖫 E 🗆 W				
2 WELL OWNER: L	ast Name:	First:			where well is located			
Business:	Whitehair	David	direction from	nearest town o	r intersection): If at owner	's address,	check here:	
Address:	1960 Nail Rd							
Address: P O Box 26 City: Abilene, State: Ks ZIP67410			Enterprise, Ks					
	ene, State: K	s zip67410	1 11	I CCI PI I	se, Ks			
3 LOCATE WELL	4 DEPTH OF CO	MPLETED WELL:	64 f	5 Latit	ude:		(decimal degrees)	
WITH "X" IN	Denth(s) Groundwate	r Encountered: 1)	20 ғ		itude:		` '	
SECTION BOX:	2) 6 2) 6 0 4)				ontal Datum: WGS 84		e2 NAD 27	
N	WELL'S STATIC W	ATER LEVEL:	8 1		e for Latitude/Longitude		65 L NAD 27	
	☐ below land surface	ce, measured on (mo-da	v-vr)1/9/2) <u>Source</u>			,	
NW NE	☐ above land surface	v-vr)		☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
KW KE	Pump test data: Well		1					
w + E		rs pumping		om Online Mapper:				
		water was			Grinne Mapper			
SW SE		rs pumping						
	Estimated Yield:	Or	6 Elevation:ft. ☐ Ground Level ☐ TOC					
· S	Bore Hole Diameter:	ft. and	Source:					
mile	1	in. to			☐ Other			
7 WELL WATER TO								
1. Domestic:		Vater Supply: well ID		10 🖽 🔿	il Field Water Supply: le	aca		
Household		ing: how many wells?			Hole: well ID			
Lawn & Garden								
☐ Livestock			12. Geothermal: how many bores?					
2. Irrigation	8. Monitoring: well ID 9. Environmental Remediation: well ID				a) Closed Loop Horizontal Vertical			
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction ☐ Surface Disc							
4. ☐ Industrial	☐ Recover		Latraction		ther (specify):			
Was a chemical/bacter	iological sample sub	mitted to KDHE? []Yes ★ No	If yes, date	e sample was submitte	d:		
Water well disinfected?								
8 TYPE OF CASING	USED: ☐ Steel P	VC Other	CASI	NG JOINTS	: 🔣 Glued 🗌 Clamped	☐ Welde	d Threaded	
Casing diameter5	in. to6.4 fi	., Diameter	in. to	ft., Dian	neter in. to	ft		
Casing height above land	surface1.6	in. Weight 2.0).Q lbs./ft.	Wall thick	eness or gauge No	2.5.0		
TYPE OF SCREEN OF	R PERFORATION MA	ATERIAL:						
☐ Steel ☐ Stair	nless Steel	erglass 🙀 PVC		☐ Otl	ner (Specify)			
☐ Brass ☐ Galv			used (open hole		(1)			
SCREEN OR PERFOR	ATION OPENINGS A	ARE:	•					
☐ Continuous Slot	■ Mill Slot	Gauze Wrapped 🔲 🛚	Forch Cut 🔲 🛭	rilled Holes	☐ Other (Specify)			
☐ Louvered Shutter	☐ Key Punched ☐	Wire Wrapped S	Saw Cut 🔲 N	Ione (Open H	lole)			
SCREEN-PERFORATI			4 ft From .	ft. to	ft From	ft. to	ft.	
GRAVEL PAG	CK INTERVALS: Fro	om 16 ft to 6	4 ft From	ft to	o ft., From	ft to	ft	
9 GROUT MATERIA	L. Neat cement	Cement grout F	Pantonita D	than	<u> </u>			
Grout Intervals: From	O ft to 16	Cement grout [2] r	entonne 🔟 (A From	A +2			
Nearest source of possibl		1t., F10111	11. 10	it., rrom	п. ю	., п.		
Septic Tank	e contamination:	nes		Livestock Pe	ns 🔲 Insectio	ida Stoman		
☐ Sewer Lines	☐ Cess Pool	Es ☐ Fit Filvy		Fuel Storage				
☐ Watertight Sewer Lin				Fertilizer Sto				
Other (Specify)			لسا	i Ciunzer 310	rageOn we	was well		
Direction from well?	NODTH WITTE	Distance from	 well? 100:		Δ			
10 FROM TO	14-14-4- PARTITION OF THE PROPERTY OF THE PROP	GIC LOG	FROM	TO	LITHO. LOG (cont.) or	DITICODI	CINTEDVALE	
		OIC LOO		T I		******	*14'4' \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	TOP SOIL	TMECHONE	50		GRAY SHALE			
	LITE COLOR L	TMESTONE	53 55		HARD LIMESTO			
	MAROON SHALE				LITE COLOR S			
	LITE COLOR L		57	64	GRAY & BROWN	SHAL	E	
	LITE COLOR S	HALE						
18 31	LITE COLOR L	IMESTONE						
	LITE GRAY &		SHANLE.					
	HARD LIMESTO							
			iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii					
47 50	LITE COLOR S						press	
	A BITS CARTACTOR	'S CERTIFICATIO	N: This wate	r well was [灯 constructed, 🗌 reco	nstructed,	or plugged	
11 CONTRACTOR'S	OR LANDOWNER			thic rocard i	s true to the best of my	, knowled	as and haliaf	
11 CONTRACTOR'S	or Landowner and was completed on (mo-day-year) <u>.1./</u> .9.,	∠.∠u and	mis record i		Kildwica	ge and benen.	
11 CONTRACTOR'S under my jurisdiction and Kansas Water Well Cor	nd was completed on (stractor's License No.	mo-day-year) .1./.9., 3.9.7 This W	Vater Well Rec	ord was cor	npleted on (mo-day-ye	ar) .1./.2	9/.20	
II CONTRACTOR'S under my jurisdiction and Kansas Water Well Corunder the business name	nd was completed on (stractor's License No. c of CENTRALKA	mo-day-year) .1./.9., 3.9.7 This W ANSASDRILLLI	N.GSi	gnature 🎣	weld D. Ma	ation		
II CONTRACTOR'S under my jurisdiction an Kansas Water Well Cor under the business name Mail I white copy alo	nd was completed on (tractor's License No. of CENTRALKA ng with a fee of \$5.00 for e	mo-day-year) .1./9, 3.9.7 This W ANSASDRILLI ach constructed well to: K	N.GSi ansas Department	gnature 6.2 of Health and	Environment, Bureau of Wa	iter, GWTS	Section,	
11 CONTRACTOR'S under my jurisdiction ar Kansas Water Well Cor under the business name Mail 1 white copy alo	nd was completed on (tractor's License No. of CENTRALK ng with a fee of \$5.00 for e ., Suite 420, Topeka, Kansa	mo-day-year) .1./9, 3.9.7 This W ANSASDRILLI ach constructed well to: K	N.GSi ansas Department	gnature of Health and ner and retain o	weld D. Ma	iter, GWTS tone 785-296	Section,	