WATER WELL R			WWC-5	20		ision of Wat	I	u	/ell ID		
1 LOCATION QF WA		<del></del>				tion Numb				ge Nymber	
County: GBA	my		Fraction 56 1/4 St	NASW/A	1/4	5	T	<b>3</b> s		<b>D</b> E□W	
2 WELL OWNER: La	st Name: Pol	and	First 6	erge s			where well is le				
2 WELL OWNER: Last Name: Poland First Groupe 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:											
Address: Tunction City State: 165 ZIP: 6644/											
City: 7/4/00/10/	Cory	State:	S ZIP: 0	77/		- <del>1</del>	4	4 1 1	<u> </u>		
3 LOCATE WELL WITH "X" IN	4 DEPTH	I OF CON	MPLETED	WELL:	<i>20</i> ft	. 5 Latit	ude: <b>N.38</b> . s itude <b>: N.096</b> .	58,6	<u>8/</u>	(decimal degrees)	
SECTION BOX:	Depth(s) G	roundwater	Encountered	l: 1) <b>80</b>	2 ft.	Long	itude <b>W09.6</b> 9	54,2	7.L	(decimal degrees)	
N	2)										
	below	land surface	e, measured of	on (mo-day-y	r) <b>7/22/2</b>	024 Source	FPS (unit make/m	ngitude:	MIN	E Tery 20	
NW NE	□ above land surface, measured on (mo-day-yr) (WAAS enabled? □ Yes □ No)										
		Pump test data: Well water was									
W	aner		s pumping water was				Online Mapper:	•••••	•••••		
SWSE	after	hour	s pumping .				. 1232	1	/		
	Estimated Y	Yield: <b>ZO</b>	. <b>T</b> gpm <b>?''</b> in. t	1221			ntion: 12.33 e: Land Surve				
S  1 mile	Bore Hole	Diameter:	in. t	o . <b>/?/</b>	. ft. and	<u> 30010</u>				pograpine map	
1 mile  in. to ft. Uther											
1. Domestic:			ater Supply:	well ID		10. 🔲 O	il Field Water Su	pply: lease			
Household			ng: how man			11. Test	Hole: well ID	• • • • • • • • • • • • • • • • • • • •		****	
Lawn & Garden	7. Aquifer Recharge: well ID										
Livestock 2.  Irrigation	8. Monitoring: well ID						12. Geothermal: how many bores?				
3. Feedlot		] Air Sparg		Soil Vapor E			pen Loop  Sur				
4. ☐ Industrial		☐ Recovery		njection		13. 🔲 O	ther (specify):				
Was a chemical/bacteriological sample submitted to KDHE?   Yes Wo If yes, date sample was submitted:											
Water well disinfected?    Yes □ No  GLENYO YOU WAS TO SEE THE SEE TH											
8 TYPE OF CASING USED: Steel PVC Other											
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:											
SCREEN OR PERFORATION OPENINGS ARE:  ☐ Continuous Slot											
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From 120. ft. to 120 ft., From ft. to ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From3.6. ft. to 1.29. ft., From ft. to ft., From ft. ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
☐ Septic Tank		Lateral Lin		Pit Privy		Livestock Po		Insecticide	Storage		
☐ Sewer Lines		Cess Pool		Sewage Lag		Fuel Storage		Abandoned		Well	
☐ Watertight Sewer Lin☐ Other (Specify)		Seepage Pi		Feedyard		Fertilizer St	orage $\square$	Oil Well/G	as Well		
Direction from well?	VorTh W	167	Dista	nce from we	11? <i>30(</i>	2 <b>.</b>		ft.			
10 FROM 10		LITHOLO	GIC LOG		FROM	10				G INTERVALS	
0 1	10p 50j	L,			93	120	Brown	SHAL	<u>e</u>		
11 11	Brown	J CLAY			<u> </u>				······································		
15 36	MISTO		7 4								
36 53	GAOLI S	-ShA	V6								
36 53 6	JM45 To	NE									
56 66	ECEV SI	bale			Notes:						
66 80 Brown shall ( -											
85 93 Limistone WALLY											
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) 2222 and this record is true to the best of my knowledge and belief.											
Kansas Water Well Con	under my jurisdiction and was completed on (mo-day-year) . 1.22.202 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No 4.5 This Water Well Record was completed on (mo-day-year)										
under the business name	of . <b>H.A.</b>	H.C. MAAN	W& <i>U</i>	L W	Lange			. sq [ ] [ ] .	1	1.15/.01	
Mail 1 white copy alon	ng with a fee of	t \$5.00 for ea	cn constructed	Well to: Kans	sas Departmeni	of Health and	Environment, Bu	auto Vicinia.	GWTS S	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 1/20/2015											
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