corrected

| | | RECORD | | WWC-5 | | vision of Wat | - 1 | | W-H ID | | |
|---|---|-------------------------|--------------------------|----------------------|--------------------|---|--|-----------------|------------|--------------------|--|
| Origina | l Record | Correction | Chang | e in Well Use | | ources App.] | | bin Manab | Well ID | as Masshar | |
| 1 LOCATION OF WATER WELL: Fraction SW 1/4 NW 1/4 NE 1/4 | | | | | | Section Number Township Number Range Number T 15 S R 17 Z E W | | | | | |
| 2 WELL OWNER: Last Name: First: Jerry Street or Rural Address where well is located (if unknown, distance and | | | | | | | | | | | |
| Business: | : | | | - | direction from | irection from nearest town or intersection): If at owner's address, check here: | | | | | |
| Address: 4600 California Rd. Address: | | | | | | Vest of Celifornia Rd. 1/4 mile on Thomas Rd | | | | | |
| City: | - VO 00070 | | | | | | | | | | |
| 3 LOCAT | | 4 DEPT | I OF CON | | 360 4 | E 1 444 | | 38.72314 | | .(decimal degrees) | |
| | WITH "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)315 | | | | | | uue: iitudo | 95.4680 | 3 | (decimal degrees) | |
| 1 | 2) ft. 3) ft., or 4) | | | | | Dry Well Datum: 71 WGS 84 NAD 83 NAD 27 | | | | | |
| ĺ | well's static water level: 295 | | | | 95 ft. | Source | e for Latitu | de/Longitude: | | | |
| 1 1 | below land surface, measured on (mo-day | | | | y-yr).!!!!22/20/ | | | | | | |
| NW | Dabove land surface, measured on (mo-day- | | | | | | (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map | | | | |
| w | 1 | | | | | Online Mapper: | | | | | |
| | Well water was ft. | | | | | | | | | | |
| SW | after hours pumping | | | | gpm | 6 Elev | ation: 10 | 51 A | 71 Ground | Level FITOC | |
| | S Estimated Yield:70gpm Bore Hole Diameter:10in. to360 | | | | ft and | 6 Elevation: 1051 | | | | | |
| | I mile in. to | | | | ft. | | ☑ Other | KOLAR | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | | | |
| | ☐ Household 6. ☐ Dewatering: how many wells? ☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID | | | | | | | | | | |
| Z Livest | | | | g: well ID | | | | w many bores | | | |
| 2. Irrigat | | | | al Remediation: well | | | | ☐ Horizonta | | | |
| 3. Feedle | 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E | | | | | b) Open Loop Surface Discharge Inj. of Water | | | | | |
| 4. ☐ Industrial ☐ Recovery ☐ Injection | | | | | | | | ỳ): | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☑ No If yes, date sample was submitted: | | | | | | | | | | | |
| Water well disinfected? Ves No | | | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other | | | | | | | | | | | |
| Casing diameter 6 in to 360 ft. Diameter in to ft., Diameter in to ft. Casing height above land surface 18 in Weight bls/ft. Wall thickness or gauge No. SCH40 | | | | | | | | | | | |
| 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 | | | | | | | | | | | |
| Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole) | | | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From 300 ft. to 360 ft. From ft. to ft. From ft. to ft. | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | |
| | | | | | | | | | | | |
| Nearest source of possible contamination: Septic Tank | | | | | | | | | | | |
| ☐ Sewer | | | Cess Pool | Sewage L | agoon [| Fuel Storage | • | ☐ Abando | ned Water | Well | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | | | |
| Direction from well? .N | | | | | | | | | | | |
| 10 FROM | TO | J | LITHOLOG | GIC LOG | FROM | TO | | | PLUGGIN | G INTERVALS | |
| 0 | 3 | Top Soil | | | | | | | | | |
| 3 | 13 | Tan Shale | | | | | | | | | |
| 13 | 23 | Limestone | | | | | | | | | |
| 23 | 203 | Grav Shale | | | | | | | | | |
| 203 | 207 | Limestone | | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| 207 | 312 354 | Grav Shale | | | Natas | | L | | | | |
| 312 354 | 360 | Sandstone Grav Shale | Notes: | IVIUS. | | | | | | | |
| JOH JOO GIAV STIATE | | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \(\sqrt{\omega}\) constructed, \(\sqrt{\omega}\) reconstructed, or \(\sqrt{\omega}\) plugged | | | | | | | | | | | |
| under my j | urisdiction a | and was comp | leted on (m | no-day-year) .19/22/ | /20.12 and | this record | is true to t | he best of my | knowled | ge and belief. | |
| Kansas Wa | ter Well Co | ntractor's Lic | ense No(atod Drillir | 760 This W | Vater Well Re | cord was co | mpleted or | n (mo-day-ye | ar) .19/24 | 12012 | |
| under the b | usiness nan | Send one copy t | o WATER W | ELL OWNER and retain | n one for your red | ords. Fee of \$ | 5.00 for each | constructed wel | 1. | | |
| 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 | | | | | | | | | K | SA 82a-1212 | |