WATER WELL RECORD Form WWC-5		Division of Water		NATS VO
X Original Record Correction Change in Well Ust	R	esources App. No.	Well ID	MW2
1 LOCATION OF WATER WELL: Fraction County Osage SW 1/4 S	W 1/4 SW 1/4 SE	Section Numb	er Township Number Range Num T 16 S R 16	
2 WELL OWNER: Last Name: Burns First: Richard Street or Rural Address where well is located (if unknown, distance and direction				
Business:	from nearest	town or intersection): If at owner's address, check here:	
Address: PO Box 278	105 E 6th St., Ly	ndon KS		
Address:				
City Lyndon State: KS ZIP: 66451 3 LOCATE WELL 4 DEPTH OF COMPLETED W.	ELL: 15 ft	5 Latitude:	38.60886 (decima	al degrees)
WITH "X" IN Depth(s) Groundwater Encountered:	1) ft	Longitud		al degrees)
SECTION BOX: 2) ft 3) ft, or 4) Dry Well Horizontal Datum; X WGS 84 NAD 83 NAD 2				
N WELL'S STATIC WATER LEVEL: 5.5 ft. Source for Latitude/Longitude:				
below land surface, measured on (mo-day-yr) 6/22/17 GPS (unit make/model:				
NW NE NE Dabove land surface, measured on (mo-day-yr) (WAAS enabled? Yes No) Pump test data: Well water was ft X Land Survey Topographic Map				
after hours pumping		_	e Mapper	
W E Water well was	ft		Маррел	
sw se after hours pumping	gpm	6 Elevation		
Estimated Yield: gpm		Source X		ographic Map
Bore Hole Diameter: 7.25 in	toft, and		Other	
sin	toft			
7 WELL WATER TO BE USED AS:		-J		
1 Domestic: 5 Public Water Supply: well ID		10 Oil Field	Water Supply: lease	
Household 6 Dewatering: how many wells?		11 Test Hole: we	II ID	
Lawn & Garden 7 Aquifer Recharge: well ID		Cased	Uncased Geotechnical	
Livestock 8 X Monitoring: well ID MW2		12 Geothermal: He		
2 Irrigation 9 Environmental Remediation: well ID 3 Feedlot Air Sparge Soil Vapor Extraction		a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water		
3 Feedlot Air Sparge Soil Vapo 4 Industrial Recovery Injection	Extraction		ecify):	
		Other (sp		
Was a chemical/bacteriological sample submitted to KDHE? Yes X No If yes, date sample was submitted:				
Water well disinfected? Yes X No				
8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: Glued Clampled Welded X Threaded				
Casing diameter 2 in to 5 ft, Diameter in to ft, Diameter in to ft, Casing height above land surface -0.25 in Weight lbs./ft. Well thickness or gauge No				
TYPE OF SCREEN OR PERFORATION MATERIAL:				
Steel Stainless Steel Fiberglass X PVC Other (Specify)				
Brass Galvanized Steel Concrete tile None used (open hole)				
SCREEN OR PERFORATION OPENINGS ARE:				
Continuous Slot X Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)				
Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)				
SCREEN-PERFORATED INTERVALS: From 5 ft. to 15	ft, From	ft. to	ft, From ft. to	ft,
GRAVEL PACK INTERVALS: From 3 ft. to 15 ft, From ft. to ft, From ft. to ft,				
9 GROUT MATERIAL: Neat cement Cement grout X Bentonite X Other Concrete: 0-0.5'				
Grout intervals: From 0.5 ft. to 3 ft, From	ft. to ft,	from ft.	toft,	
Nearest source of possible contamination:		ivestock Pens	Importional Stormer	
Septic Tank Lateral Lines Pit Pri Sewer Lines Cess Pool Sewag	· ===	uel Storage	Insecticide Storage Abandoned Water Well	
		ertilizer Storage	Oil Well / Gas Well	
Watertight Sewer Lines Seepage Pit Feedya Other (Specity)	·• r	oranzor Storage	On Well / Gas Well	
	e from well? ~10		ft	
10 FROM TO LITHOLOGIC LOG	FRO	M TO	LITHO, LOG (cont.) or PLUGGING II	NTERVALS
0 0.8 Asphalt, gravel fill			2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
0.8 14.5 Silty clay				
14.5 15 Crystalline limestone				
				-
			Texaco; U4-070-14856	
Target of monitoring well is shallow groundwater, <20' of grout was installed at				
the direction of KDHE.				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year). 5/31/17 and this record is true to the best of my knowledge and belief. Kansas Well Contractor's				
License No 757 This Water Well Record was completed on (mo-day-year) 8/22/17 under the business name of Larsen & Associates, Inc. Signature				
under the business name of Larsen & Associates. Inc.				
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	SA 82a-1212		Revised 7/1	0/2015