WATER WELL R		WWC-5		sion of Water		MW-18R	
Original Record		ge in Well Use		urces App. No		Well ID	
I LOCATION OF W	ATER WELL:	Fraction		ion Number 11	40	er Range Number R 22 ■ E □ W	
County: Miami		1/4 SW 1/4 SW 1/4					
2 WELL OWNER: Last Name: First: 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: Union Pacific Stop 1030  Address: 1400 Pacific Stop 1030  Address: 1400 Pacific Stop 1030							
Address: 1400 Douglas Street							
City: Omaha	State: NE	ZIP: 68179					
3 LOCATE WELL	4 DEPTH OF CO	MPLETED WELL:	<b>.57</b> ft	5 Latitue	. 38.493 <sup>1</sup>	(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater		Longit	Longitude: -94.95191 (decimal degrees)			
SECTION BOX:	2) <del></del>		Horizon	ital Datum: WGS 8	4 □ NAD 83 □ NAD 27		
	WELL'S STATIC WA		Source	Source for Latitude/Longitude:			
	below land surfac		■ GP	■ GPS (unit make/model: Garmin etrek 10			
NW NE	above land surface		_	(WAAS enabled? ■ Yes □ No)			
	Pump test data: Well after hou			☐ Land Survey ☐ Topographic Map			
W	Well	gpm	☐ Un	Online Mapper:			
SW SE	after hou	gpm		DI o			
X	Estimated Yield:				6 Elevation: 860ft. Ground Level TOC		
S	Bore Hole Diameter:8.5. in. to a ft. and			Source:   Land Survey GPS Topographic Map			
1 mile  in. to							
7 WELL WATER TO BE USED AS:							
1. Domestic:		ater Supply: well ID				ease	
☐ Household☐ Lawn & Garden		ng: how many wells?			ole: well ID		
Livestock	7. ☐ Aquifer I 8. ■ Monitori	N- 18K	Cased Uncased Geotechnical 12. Geothermal: how many bores?				
2. Irrigation	9. Environmen			a) Closed Loop   Horizontal   Vertical			
3. ☐ Feedlot	🔲 Air Sparg					scharge  Inj. of Water	
4. ☐ Industrial	☐ Recovery	☐ Injection		13. 🗌 Oth	er (specify):		
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 fin. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 30 in. Weight Ibs/ft. Wall thickness or gauge No. 49							
Casing diameter							
Casing height above land surface							
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: From It. to 27 ft., From ft., From ft., From ft.							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From 2 ft. to ft., From ft. to ft. From ft. to ft.							
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.							
Nearest source of possible contamination:							
Septic Tank	Lateral Lin		_	Livestock Pens		eide Storage	
Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well							
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) Railroad Yard							
■ Other (Specify) Railroad Yard  Direction from well? Sloo Feet Distance from well?							
10 FROM TO	LITHOLO		FROM			PLUGGING INTERVALS	
	Top Soil fill						
0 5 27	Brown Clay						
	Notes:						
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) 07/30/2018 and this record is true to the best of my knowledge and belief.							
under my jurisdiction and	id was completed on ()	mo-day-year) <i>V./.30</i> /2 710 — This W	الاعالية عام الاعالية العام الاعالية العام الاعالية العام العام العام العام العام العام العام العام العام الع العام العام ال	his record is	true to the best of m	y knowledge and belief.	
Kansas Water Well Contractor's License No. 7.10							
Mail I white copy alo	ng with a fee of \$5.00 for ea	ach constructed well to: Kan	sas Department of	of Health and E	nvironment, Bureau of W	ater, 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 7/10/201							