| WATER WELL R  |  | Form WWC                               |                         |                 | sion of Water   |                       |                  |                   |  |
|---|--|--|-------------------------|-----------------|---|-----------------------|------------------|-------------------|--|
|   | Correction Change in Well Use            |  |                         | urces App. No.  |   | Well ID               |                  |                   |  |
| 1 LOCATION OF W   | NOF WATER WELL: Fraction NEWWW NW        |  |                         | I               | Section Number Township Numb                                      |                       |                  | ige Number        |  |
| County: W45N  | ING 101                                  | N NE                                   |                         |                 | 36  | T S                   |                  | ZE □ W            |  |
| 2 WELL OWNER: L<br>Business:  |  |  | MAROLD                  |                 |   | nere well is located  |                  |                   |  |
| Business: Address: 2445 SPENCE AVE  direction from nearest town or intersection): If at owner's address, check here:  |  |  |                         |                 |   |                       |                  |                   |  |
| Address:  |  |  |                         |                 |   |                       |                  |                   |  |
|   | 7  |  | •                       |                 | T   |                       |                  | ***               |  |
| 3 LOCATE WELL<br>WITH "X" IN  | 4 DEPTH                                  | OF COMPLET                             | TED WELL:               | <b>5</b> .5 ft. | 5 Latitud   | e:                    |                  | (decimal degrees) |  |
| SECTION BOX:  | Depth(s) Gro                             | oundwater Encoun                       | tered: 1)               | ft.             | Longitude:(decimal degrees)                                       |                       |                  |                   |  |
| N N   |  | ft. 3)                                 |                         |                 | Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27                                 |                       |                  |                   |  |
|   | WELL'S ST                                | ATIC WATER LI and surface, measu       | EVEL:                   | 7/7/17          | Source for Latitude/Longitude:                                    |                       |                  |                   |  |
| NWNE  | above la                                 | and surface, measu                     | red on (mo-day-)        | vr)             | GPS (unit make/model:)  (WAAS enabled?  Yes No)                   |                       |                  |                   |  |
| I NW - I NE   | Pump test da                             | ta: Well water wa                      | ıs ft.                  | •               | ☐ Land Survey ☐ Topographic Map                                   |                       |                  |                   |  |
| W E   | after hours pumping                      |  |                         |                 | Online Mapper:  |                       |                  |                   |  |
| SW SE   | Well water was ft.                       |  |                         |                 |   |                       |                  |                   |  |
|   | after hours pumping gpm Estimated Yield: |  |                         |                 | 6 Elevation:ft. ☐ Ground Level ☐ TOC                              |                       |                  |                   |  |
| S   | Bore Hole Diameter:                      |  |                         | . ft. and       | Source: Land Survey GPS Topographic Map                           |                       |                  |                   |  |
| mile  | in. to ft.                               |  |                         |                 | ☐ Other   |                       |                  |                   |  |
| 7 WELL WATER TO BE USED AS:   |  |  |                         |                 |   |                       |                  |                   |  |
| 1. Domestic:  |  | Public Water Sup                       |                         |                 |   | ield Water Supply: le |                  |                   |  |
| Household   |  | Dewatering: how                        |                         |                 | 11. Test Hole: well ID  |                       |                  |                   |  |
| ☐ Lawn & Garden☐ Livestock  |  | Aquifer Recharge<br>  Monitoring: well |                         |                 | ☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores? |                       |                  |                   |  |
| 2. Irrigation   |  | vironmental Remo                       |                         |                 |   | ed Loop    Horizont   |                  |                   |  |
| 3. ☐ Feedlot  |  | Air Sparge                             | ☐ Soil Vapor E          |                 | b) Open Loop ☐ Surface Discharge ☐ Inj. of Water                  |                       |                  |                   |  |
| 4.  Industrial  |  | Recovery                               | ☐ Injection             |                 | 13. 🔲 Othe  | r (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 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:   |  |  |                         |                 |   |                       |                  |                   |  |
| ☐ 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   |  |  |                         |                 |   |                       |                  |                   |  |
| GRAVEL PACK INTERVALS: From   |  |  |                         |                 |   |                       |                  |                   |  |
| 9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other  |  |  |                         |                 |   |                       |                  |                   |  |
| Grout Intervals: From   |  |  |                         |                 |   |                       |                  |                   |  |
| Nearest source of possible contamination:   |  |  |                         |                 |   |                       |                  |                   |  |
| Septic Tank   | _  | Lateral Lines                          | ☐ Pit Privy             |                 | Livestock Pens  |                       | cide Storage     |                   |  |
| Sewer Lines   |  | Cess Pool                              | ☐ Sewage Lag ☐ Feedyard |                 | Fuel Storage<br>Fertilizer Stora                                  |                       | oned Water       |                   |  |
| Cothon (Specific)   |  |  |                         |                 |   |                       |                  |                   |  |
| Direction from well?  | NONE                                     | PRESENT                                | Distance from we        | :11?            |   | ft                    |                  |                   |  |
| 10 FROM TO  |  | ITHOLOGIC L                            |                         | FROM            |   | ITHO. LOG (cont.) or  |                  | G INTERVALS       |  |
| 0 18  | BROWN                                    |  | CAY                     |                 |   | 78/91                 | - 14             |                   |  |
| /8 30   | 5AND                                     | (MED-C                                 | WESE /BL                | UE)             |   |                       | W-1911           |                   |  |
| 30 35   | SAND                                     |  | ED./BLUE                |                 |   |                       |                  |                   |  |
| 35 50   |  | MED COU                                | ese/yellu               | 4               |   |                       |                  |                   |  |
| 50 62   | KEN S                                    | WHILE                                  |                         | +               |   |                       |                  |                   |  |
|   |  |  | 0.10                    | Notes:          |   |                       |                  | *****             |  |
|   |  |  |                         |                 |   |                       |                  |                   |  |
|   |  | ***                                    |                         | 1               |   |                       |                  |                   |  |
| 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) 2.1.71.13 and this record is true to the best of my knowledge and belief. |  |  |                         |                 |   |                       |                  |                   |  |
| under my jurisdiction and was completed on (mo-day-year) 2.1.71.13 and this record is true to the best of my knowledge and belief.  |  |  |                         |                 |   |                       |                  |                   |  |
| Kansas Water Well Contractor's License No   |  |  |                         |                 |   |                       |                  |                   |  |
| under the business re-  | ntractor's Lice                          | ense No                                | This Wa                 | ter Well Rec    | ord was comp  | leted on (mo-day y    | rear).           | <b>2011.7</b>     |  |
| under the business nam  | ntractor's Lice                          | ense No                                | EY DRIL                 | ter Well Rec    | W   | eleted on (mo-day y   | rear) . $\sim$ . | 20113             |  |

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