WATER WI			Form V	WC-	5		rision of Wat				_]		
☐ Original Rec			☐ Change				ources App.			Well		NIl	
1 LOCATION OF WATER WELL: Fraction County: Marion '4NE'4NW45							Section Number Township Number Range Number						
County:	ion		Ve4NW4	Street or Pro	et or Rural Address where well is located (if unknown, distance and								
2 WELL OWNER: Last Name: Business: Business: 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: [7] Laighn (Countyhaks)													
Address:		013 611		"Ly	2011								
	jar		State: K			175	1						
	3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:						ft. 5 Latitude:(decimal degrees)						
SECTION B				red: 1)		Longitude:(decimal degrees)							
N	2) ft. 3) ft., or 4) \(\begin{align*}						I		WGS 84 □ NA		□ N	AD 27	
							Source for Latitude/Longitude: GPS (unit make/model:)						
NW N	above land surface, measured on (mo-day-y							(WAAS enabled? Yes No)					
	Pump test data: Well water was ft.							☐ Land Survey ☐ Topographic Map					
w Y								☐ Online Mapper:					
Well water was ft. SWSE after hours pumping													
	gpm	6 Eleva	ation	ı :	it. 🔲 Gre	ound	Level TOC						
Estimated Yield: a.c						ft. and		<u>ce</u> : 🔲	Land Survey	GPS [□ То	pographic Map	
1 mile Other													
7 WELL WAT	TER TO			•									
1. Domestic:					y: well ID				ld Water Supply:				
	☐ Household 6. ☐ Dewatering: how many wells?												
☐ Livestock	Lawn & Garden 7. ☐ Aquifer Recharge: well ID Livestock 8. ☐ Monitoring: well ID						_		al: how many bore				
2. Irrigation									Loop Horizon				
3. ☐ Feedlot								b) Open Loop Surface Discharge Inj. of Water					
4. Industrial] Recovery		Injection	_	13. 🗆 0	ther (specify):			• • • • • • • • • • • • • • • • • • • •	
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:													
Water well disir													
8 TYPE OF C	<u>ASING</u>	USED: □ Ṣ	teel TPV	C □ Otŀ	ner	CASI	NG JOINTS	S: □	Glued Clampe	ed 🗌 W	elded	. Threaded	
Casing diameter.	<i>البينة</i> ع اعماد اعتدا	in. to	λ ft.,	Diamete	r cht マカお	in. to 2 lbc/θ	It., Diai	meter	or gauge No	14	π.		
TYPE OF SCRI	EEN OR	PERFORAT	ΓΙΟΝ ΜΑΊ	. wei ΓΕΡΙΑΙ		. # . # 105./1L	wan unc	Micss	of gauge 140	*			
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ DPVC ☐ Other (Specify)													
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)													
SCREEN OR P													
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)													
	nutter	☐ Key Punci	nea ∟ w: AIS: Erom	ire wrap	ped 2	WCut IN	None (Open I	Hole)	ft From	4	it to	A	
SCREEN-PERFORATED INTERVALS: From 7.0. ft. to ft. from ft. to ft., From ft., From ft. ft. GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. ft.													
Grout Intervals:	From	© ft. to	20	. ft., Fron	n	ft. to	ft., From	1	ft. to	ft	•		
Nearest source o	f possible	e contaminati	on:										
Septic Tank			Lateral Lines		☐ Pit Privy		Livestock P		☐ Insect			5.711	
☐ Sewer Lines ☑ Watertight S		_	Cess Pool Seepage Pit		☐ Sewage Lag☐ Feedyard		Fuel Storage Fertilizer St		☐ Aband ☐ Oil W			veii	
☐ Other (Spec	ifv)	_						-			· C11		
Direction from we	ell?	<u> </u>		Di	stance from we	:11?3 <i>5</i>	·····		f				
	Ю		THOLOG	GIC LOC	3	FROM	ТО	LIT	HO. LOG (cont.)	or PLUG	GIN	3 INTERVALS	
	3 -	10P J	Oil										
9	مل	Clax	•		******	<u> </u>							
12 3	<u> </u>	$6imS^{\prime}$	TONE	<u> </u>	01.	10							
35 5	/ +	<u> </u>	W+1)	01	Sha	10							
57 6	2	Line	210			 							
63 7	3 1	Vale	1/4	00	4010	Notes:		l					
Ø.5 17		- ray	Mas	<u>~</u>	nale	110168:							
	+	,				1							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)													
under my jurisdiction and was completed on (mo-day-year)													
Kansas Water Well Contractor's License No. 1. 5 This Water Well Record was completed on (mo-day-year)													
Under the business name of													
INSTRUCTION Depart	15: Send on timent of He	e copy to WATER alth and Environm	well OWNE ent, Bureau of '	ek and retai Water, Geo	in one copy for you logy Section, 1000	ir records. Submi SW Jackson St.,	s ree of \$5.00 to Suite 420, Topel	n each d ka, Kan	constructed well along v isas 66612-1367. Telep	vitti one (Wi hone (785)	296-3	дру 10 Kansas 565.	
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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012													