		RECORD		WWC-5		Division of Wate	1				
		Correction		e in Well Use		esources App. N		Well ID			
1 LOCATION OF WATER WELL: Fraction						Section Number			e Number		
County	: Andersor)		NW 1/4 SW 1/4 NE !		5					
2 WELL OWNER: Last Name: Burns First: Mike Street or Rural Address where well is located (if unknown, distance and											
Business:					direction fro	rection from nearest town or intersection): If at owner's address, check here:					
Address: 259 W. Park Road 24400 NE Nevada Road, Garnett, KS 66032											
Address:	Comet		State: KS	ZIP: 66032	21100 / 1	, , , , , , , , , , , , , , , , , , , ,					
City:	2 LOCATE WELL										
	WITH "V" IN 4 DEPTH OF COMPLETED WELL:						200 ft. 5 Latitude: 38.248075 (decimal degrees)				
	SECTION BOX. Depth(s) Groundwater Encountered: 1)9						ft. Longitude: -95.225349 (decimal degrees)				
	N 2)						ontal Datum: WGS 8				
WELL'S STATIC WATER LEVEL:						Double to Extrade					
I	below land surface, measured on (mo-day-yr					(
NW	above land surface, measured on (mo-day-yr					(
Pump test data: Well water was						☐ Land Survey ☐ Topographic Map					
W E after hours pumping									•••••		
sw			vater was								
	1 1		er hours pumping gpm			6 Elevation:ft. Ground Level TOC					
ļ ————————————————————————————————————	Pore Hole	Bore Hole Diameter:5.5/8 in. to200			and Source: Land Survey GPS Topographic Map						
1 r	S nile	Bole Hole	in. to fi								
7 WELL WATER TO BE USED AS:											
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID											
	Household 6. □ Dewatering: how many wells?										
_	☐ Lawn & Garden										
	☐ Livestock S. ☐ Monitoring: well ID										
. —	2. ☐ Irrigation 9. Environmental Remediation: well ID										
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex											
4. Industr			Recovery				13. Other (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 HD.POLY CASING JOINTS: Glued Clamped Welded Threaded											
8 TYPE OF CASING USED: Steel PVC Other III. F. M. J CASING JOINTS: Glued Clamped Welded Threaded											
Casing diametebelow in. to											
TYPE OF SCREEN OR PERFORATION MATERIAL: NONE											
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)											
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE: NONE											
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
□ Continuous Stot □ Mili Stot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)											
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other. Grout Intervals: From 200 ft. to 3 ft., From ft. to ft.											
Nearest source of possible contamination:											
Nearest source of possible contamination: Septic Tank											
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)											
Direction from well?											
10 FROM	TO		LITHOLO		FROM		LITHO. LOG (cont.) o		INTERVALS		
0	1	soil/clay									
1			235-246 s								
14			246-254 li		400	3	9-400' Bores Plugge	ed with			
20			254-283 s		1.00		High Solid Bentonit				
24		sandstone					g.i Cond Dontolin				
28		lime	200 -1 00 II	1110							
32		shale									
						Notes:					
194 210 lime											
210 230 shale											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) .10/07/2016 and this record is true to the best of my knowledge and belief.											
Kansas Water Well Contractor's License No. 561 This Water Well Record was completed on (mo-day-year) .10/10/2016											
under the business name of Evans Energy Development, Inc. Signature											
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 KSA 82a-1212 Revised 7/10/2015											