		RECORD		WWC-5		Division of Wate		Well ID MW-14	
		Correction		e in Well Use Fraction		esources App. Nection Numbe			
	<sub>y:</sub> Harvey	VAIER WEE	L.	SW14 NE 14 NW 1/2		8	T 23 S		
2 WELL OWNER: Last Name: Sell First: Dave Street or Rural Address where well is located (if unknown, distance and									
Business: Mid Kansas Cooperative direction from nearest town or intersection): If at owner's								r's address, check here: 🗌	
Address: Address: 303 N US Hwy 81 By-Pass 51						11 W. 24th Street, North Newton, Ks.			
City: McPherson State: KS ZIP: 67460									
3 LOCATE WELL A DEPTH OF COMPLETED WELL: 30 ft 5 Latitude: 38.07121 (designal degrees)									
WITH "	'X" IN DN BOX:	Depth(s) Gro	oundwater	Encountered: 1)14	.36 <sub>ft</sub>	6ft. Longitude:			
	N BUA:	2)	ft. 🤅	3) ft., or 4)	🗌 Dry Well	Horiz	ontal Datum: WGS 8	4 🗆 NAD 83 🗖 NAD 27	
<u></u>	WELL'S STATIC WATER LEVEL:					Gource for Educade Dongrade.			
NW									
w	E after hours pumping						nline Mapper: NAVD8	38	
sw	- SW SE -   well water was ft.								
	Estimated Vield: gnm							. 🔲 Ground Level 🔳 TOC	
L	S Bore Hole Diameter:					nd <u>Source</u> : Land Survey GPS Topographic Map			
1 mile in. to ft.									
7 WELL WATER TO BE USED AS:         1. Domestic:       5. □ Public Water Supply: well ID         10. □ Oil Field Water Supply: lease									
1. Domestic		_		g: how many wells?					
_	Lawn & Garden 7. Aquifer Recharge: well ID								
Livest		den       7. □ Aquifer Recharge: well ID         8. ■ Monitoring: well ID				12. Geothermal: how many bores?			
2. 🗌 Irrigat									
3. □ Feedlo 4. □ Indust						b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify):			
4. Industrial       Recovery       Industrial       IS. Other (specify).         Was a chemical/bacteriological sample submitted to KDHE?       Yes       No       If yes, date sample was submitted:									
Water well disinfected? Ves No									
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded									
Casing diameter									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
Steel       Stainless Steel       Fiberglass       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 .15 ft. to .39 ft., From ft., From ft., From ft. to ft. to									
SCREEN-PERFORATED INTERVALS:         From									
9 CROUT MATERIAL: □ Nest cement □ Cement grout ■ Rentonite □ Other									
9 GROUT MATERIAL:  Neat cement Cement grout Bentonite Other									
Nearest source of possible contamination:									
Septic Tank       Lateral Lines       Pit Privy       Livestock Pens       Insecticide Storage         Sewer Lines       Cess Pool       Sewage Lagoon       Fuel Storage       Abandoned Water Well									
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)									
	***************************************								
10 FROM	TO		ITHOLOG		FROM			r PLUGGING INTERVALS	
0		Clay, dark bro hard, no odor					siit and clay, satura odor	ted, slight petroleum	
10		Sandy Clay, 1		n. moist.	-				
<b></b>		plastic, no od			1				
		Clay, tan to gray, some sand and silt,						· · · · · · · · · · · · · · · · · · ·	
		wet, no odor							
14	15	Clayey Sand, tan to gray, plastic, wet Notes				otes:			
to saturated, slight odor									
15 30 Sand, gray to tan, fine to coarse, some 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) .1.1/1/17 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 604. This Water Well Record was completed on (mo-day-year) .!! .2.1.1.1									
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									