WATE	ER WELI	L RECORD F	orm WWC-5		Division of V	Voter				
A) Orig	inal Record	Correction	Change in Well Use		Resources Ap			Well ID		
		WATER WELL:		1100	Section Nu		Township Number			
Cou	nty:	Lywiels	Fraction ENV	V45L4	39		T 27 S	R/ NE [] W		
2 WEL	L OWNER	R: Last Name:	Firet.		r Rurál Addre	ess whe		(if unknown, distance and		
i Ducies		the transfer of the second sec		direction (	rom nearest tow	m or inte	rsection): If at owner	's address obeck here:		
Addre	88: 20 E			1.	direction from nearest town or intersection): If at owner's address, check here:					
City:	سيّر لها 🐣	lity State	Ks ZIP: 6721	/	20 21	ريمناهرب	New	ツ		
A STATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN THE PERSON NAMED IN THE PERSON NAMED IN	TE WELL	1		The second second	<del></del>	····		<del> </del>		
	I "X" IN	4 DEPTH OF	COMPLETED WELL	L: 25	. ft. 5 La	titudo-		(Austria) 1		
	ION BOX:	10 A	1 I angitudo							
N 2)					LIDIV WEIL I Intermed TO DECK OA FEBRUAR OA FEBRUAR OF					
WELL'S STATIC WATER LEVEL: 1.2.					"A The state of th					
below land surface, measured on (mo-day					۳۰۰ است ال	GPS (	unit make/model:	**********		
NW	NW NE Dabove land surface, measured on (mo-day				yr) (WAAS enabled? ☐ Yes ☐ No)					
w  -	Pump test data: Well water was				Land Survey Topographic Map					
"   "	Wall water was				Online Mapper:					
SW -	SE	H.			بيهين سنسب بجيد يديد بند	COMMENTS COMMENTS CONTRACTOR SAMPLES				
	after hours pumping				6 Elevation:					
	S Bore Hole Diameter:				ft. and Source: Land Survey GPS Topographic Map					
J		ft.	.ft. Other							
		TO BE USED AS:			L					
1. Domesti		5. 🔲 Pubi	lic Water Supply: well ID	******************	10. 🗀	Oil Fiel	d Water Sunniv Lea	DØ.		
	Household 6. Dewatering: how many wells?					11. Test Hole: well ID				
	Zi-Lawn & Garden 7. Aquifer Recharge: well ID				Cased Tilneased Tigentachnical					
	☐ Livestock  8. ☐ Monitoring: well ID				12. Geothermal: how many horse?					
2. I Irriga		9. Environ	mental Remediation: well	I ID	a) (	Closed 1	Loop 🔲 Horizontal	☐ Vertical		
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E 4. ☐ Industrial ☐ Recovery ☐ Injection					traction b) Open Loop Surface Discharge Ini. of Water				
					13. 🔲 (	Other (s	pecify):			
Was a chemical/bacteriological sample submitted to KDHE? Tyes NON If yes date sample was submitted.										
Water well disinfected?  Yes No  8 TYPE OF CASING USED:  Steel N PVC Other CASING JOINTS: Glued Clamped Welded Threaded										
8 TYPE	OF CAŞIN	G USED: Steel	PVC Other	CA	SING JOINT	S: 29-0	Glued Clamped [	☐ Welded ☐ Threaded		
in. to										
Chang noight above land suitate IB. Weight the /ft Wall thickness or course Mr.										
TYPE OF SCREEN OR PERFORATION MATERIAL:  Steel Stainless Steel Fiberglass Rev C Cher (Specific)										
United States (SELFYC United Specify)										
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:										
The state of the s										
Fig. 101 Office 190cmily										
SCREEN-PERFORATED INTERVALS: From										
0	RAVEL	CK-INTERVALS	From 24	Ti II., FIUII	1 fl.	10	ft., From	It. to ft,		
GRAVEL PACK INTERVALS: From										
Grout Interv	als: From .	A ft to /	5 ft., From		Utner	* * * * * * * * * * * * * * * * * * *	A .			
Nearest sou	rce of possi	ole contamination:	wron the Atom on a	11. 10	a., Pron	1	It. to	It.		
☐ Septic		☐ Lateral	Lines Pit Privy	. r	Livestock P	Anc	☐ Insecticide	Ctomoro		
☐ Sewer		Cess Po			Fuel Storage		☐ Abandone			
	ight Sewer L				Fertilizer St		Oil Well/C			
	(Specify)	····()/	y 	• • • • • • •	12					
Direction fro			Distance from y	well?	J. J		ft.			
10 FROM	то	LITHO	rogic rog	FROM	OT	LITH	O. LOG (cont.) or PL	UGGING INTERVALS		
8	8	107	ref (							
<u> </u>	1.5	tun	e tens	ane	1					
95	25	<u>Coerr</u>	E Tan	Jane /	1					
							· · · · · · · · · · · · · · · · · · ·			
							Article (1994) - Company of the Comp			
				Notes:	······································		**************************************	and the state of t		
								I		
II CONT	RACTOR'S	OR LANDOWNE	R'S CERTIFICATIO	N: This wat	er well was P	cons	tructed. Treconstr	ructed, or nlugged		
II CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)										
izansas yya	rei Meli Co	ntractor sylicense No	W.J.Z.Z This W	ater Well Re	cord was cor	npleted	l on (mo-day-year)	0.7.		
mider the of	usiness nam	COI Sund Diere Think	Grong Jane Jane		Ahrel					
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.										
		eks.gov/waterwell/index.htm	RI OF WHICE, GEORISY SCULION, 1170	0 SW Jackson St., KSA 82a-	Suite 420, Topeki	n, Kansas (	00612-1367, Telephone (7	85) 296-3565. Revised 9/10/2012		
visii us a										