WATER WELL R		WWC-5		ision of Water				
Original Record		nge in Well Use		urces App. No		Well ID		
1 LOCATION OF W.	ATER WELL:	Fraction		tion Number 28	Township Numb	er Range Number R 18 ■ E □ W		
2 WELL OWNER: Last Name: First: 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: 1700 00 Phillips Building								
Address: Former Cooperative Refinery								
City: Bartlesville State: OK ZIP: 74004 980 E 14th St, Chanute, KS								
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:28 ft. 5 Latitude: 37.669236 (decimal degrees)								
WITH "X" IN	Denth(s) Groundwater Enguntered: 1) NA ft I - 95 /38/81							
SECTION BOX:	2) ft.	3) ft., or 4)	Dry Well	Horizon	tal Datum: WGS 84	4 □ NAD 83 □ NAD 27		
	WELL'S STATIC WATER LEVEL:NA ft. Source for Latitude/Longitude:							
	below land surface, measured on (mo-day-yr)NA					GPS (unit make/model:)		
NW NE	NE above land surface, measured on (mo-day-yr)NA				(WAAS enabled? ☐ Yes ☐ No)			
X	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map ☐ Online Mapper: Google Earth			
W E	well water was							
SW SE	after hours pumpingNA gpm							
	Estimated Yield:NAgpm 6 Elevation:					Ground Level TOC		
S	Bore Hole Diameter:	3.25 in to 28	ft. and			GPS Topographic Map		
1 mile NA in to NA ft.								
7 WELL WATER TO		Joton Commission and LID		10 🗆 03	Giold Water Cumpley 1s	2002		
1. Domestic:		Vater Supply: well ID			ole: well ID	ease		
	☐ Household 6. ☐ Dewatering: how many wells?				☐ Cased ☐ Uncased ☐ Geotechnical			
Livestock 8. Monitoring: well ID				12. Geothermal: how many bores?				
2. Irrigation					a) Closed Loop			
3. Feedlot	Air Spar		Extraction			scharge		
4. Industrial	☐ Recover	· _ ·						
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								
8 TYPE OF CASING	USED: Steel P	VC 🗆 Other	CASIN	IG JOINTS:	☐ Glued ☐ Clamped	I ☐ Welded ■ Threaded		
Casing diameter 2 in to 26 ft., Diameter NA in to NA ft., Diameter NA in to NA ft. Casing height above land surface 12 in Weight NA lbs./ft. Wall thickness or gauge No. SCH 40								
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 .26 ft. to .28 ft., From .NA ft. to .NA ftNA ft. to .NA ftNA ft.								
GRAVEL PACK INTERVALS: From 25 ft. to 28 ft., From NA ft. to NA ft., From NA ft. to NA ft.								
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other Granular bent- 24.5-25.0 Grout Intervals: From 0 ft. to 24.5 ft., From ft. to ft., From ft. to ft.								
Nearest source of possible contamination:								
Septic Tank								
Sewer Lines								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
Other (Specify)								
Direction from well? We			,		ft.			
10 FROM TO	LITHOLO	OGIC LOG	FROM	TO L	TTHO. LOG (cont.) or	PLUGGING INTERVALS		
	·		+ +	ļ				
			+					
			+	-				
			+					
	() () () () () () () ()		+ +					
			Notes:					
Direct Push- no sampling conducted								
Direct Fusity to sampling conducted								
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) .1.1/2/16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 926								
under the business name of Eagle Environmental Consulting. IncSignature								
Mail 1 white copy alor	OI FAULE. F(IVICODIT	ach constructed well to: Kan	sas Denartment	of Health and E	wironnent Rureau of W	ater GWTS Section		
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.	· • •		KSA 82a-12		,	Revised 7/10/2015		