				WWC-5		ivision of Wa						
✓ Original Record ☐ Correction ☐ Change in Well Use					Resources App. No.			T 1' N 1	Well ID	N I		
1 LOCATION OF WATER WELL: Fraction County: Butler SE 1/4 NE 1/4 SW 1/4					I	SE 1/4 Section Number Township Number Range Number T 27 S R 3 1/2 E W						
	Last Name: LEC	NARD	First: TERESA		treet or Rural Address where well is located (if unknown, distance and							
Business:		Last Name: LLN		riisi: 1LINLOA	direction from	direction from nearest town or intersection): If at owner's address, check here:						
Address:	329 S 9	RON RD										
Address:	City: ANDOVER State: KS ZIP: 67002											
3 LOCAT		TI .			100	9 5 7 4	4 1	37 68196		(11 decrees)		
WITH "	WITH "X" IN SECTION BOX. 4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)3.						100 ft. 5 Latitude: 37.681961 (decimal degrees) 3 ft. 97.14063906 (decimal degrees)					
SECTION BOX: 2)						Dry Well Datum: WGS 84 Z NAD 83 NAD 27						
WELL'S STATIC WATER LEVEL:33						ft. Source for Latitude/Longitude:						
	below land surface, measured on (mo-day- below land surface, measured on (mo-day-											
above land surface, measured on (mo-day) Pump test data: Well water was					y-yr) : ft	r)				0)		
w after hours pumping					gpm			e Mapper:	ариис мар			
				vater was								
3w	after			hours pumping gpm			6 Elevation: 1342ft. ☑ Ground Level ☐ TOC					
S Bore Hole			ed Yield: 20gpm ble Diameter: 12 in. to 100			ft and Source: Land Survey] GPS 🔲 Topographic Map			
				in. to ft.			☑ Other KOLAR					
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
	Household 6. Dewatering: how many wells?											
_	 ✓ Lawn & Garden ✓ Livestock ✓ Aquifer Recharge: well ID Monitoring: well ID 							al: how many bores				
	2. Irrigation 9. Environmental Remediation: well ID											
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor I					r Extraction		b) Open Loop Surface Discharge Inj. of Water					
4. Industrial Recovery Injection 13. Other (specify):												
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
Water well disinfected? ✓ Yes No CASING JORIES OF CLASSING HEED TO SEE A FINAL												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter												
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												
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From .40												
GRAVEL PACK INTERVALS: From24 ft. to100 ft., From ft. to ft., From ft., From ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
☐ Septic			Lateral Line	s 🔲 Pit Privy	Г	Livestock P	ens	☐ Insection	cide Storage			
☐ Sewer	Lines		Cess Pool	☐ Sewage I	agoon [Fuel Storag	e	Abando	oned Water \			
✓ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify) Direction from well? NORTH Distance from well? .55 ft.												
10 FROM	TO		ITHOLO		FROM	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	GINTERVALS		
0	2	TOPSOIL		4.			· · · · · · · · · · · · · · · · · · ·					
2	33	CLAY										
33	100	SHALE					<u> </u>					
							-					
	ļ						-					
				· · · · · · · · · · · · · · · · · · ·	Notes:	1	1			20-11-00-11-0		
Inotes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \(\bigsize \) constructed, \(\bigsize \) reconstructed, or \(\bigsize \) plugged												
under my jurisdiction and was completed on (mo-day-year) .9/2/2015 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 611 This Water Well Record was completed on (mo-day-year) .10/1/2015												
				P.U This V								
		Send one copy to	WATER W	ELL OWNER and retai	n one for your re	cords. Fee of S	5.00 1	or each constructed we	ell.			
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS 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.kdbaks.com/visitenuell/index.html												