_	WELL R		_	WWC-5		vision of Water				
	Record _			ge in Well Use		ources App. No.		Well ID		
1 LOCATION OF WATER WELL: County: WASHINGTON			Fraction		ction Number	Township Number		ge Number		
				1/4 SW 1/4 NE 1/4		16	T 2 S	R 2		
2 WELL OWNER: Last Name: GROVER First; ADAM Street or Rural Address where well is located (if unknown, distance and										
Business: direction from nearest town or intersection): If at owner's address, check here:										
Address come MIDANI DO AD										
Address: 2203 INDAIN ROAD City: MORROWILLE State: KS ZIP: 66958										
3 LOCAT					105		30 53 078N			
WITH "				MPLETED WELL:		95 ft. 5 Latitude: 39 53.078N				
SECTION BOX: Depth(s) Groundwater En						Longitu	Longitude: 97 12.275 (decimal degrees)			
1	1		2) ft. 3) ft., or 4) ☐ Dry Well WELL'S STATIC WATER LEVEL: ft.				Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:			
		below land	below land surface, measured on (mo-day-yr). 9/13/2019				or Latitude/Longitude:	GELLON E	XPLORIST \	
NW		above land	above land surface, measured on (mo-day-yr)				GPS (unit make/model: MAGELLON EXPLORIST (WAAS enabled? Yes No)			
NW	NE		rump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map			
w	E		after hours pumping gpm				Online Mapper:			
CW	, , , , , , , , , , , , , , , , , , ,	Well water was ft.				•				
SW	SE	after	s pumping	gpm	6 Florestic	A I	Cround	Loyal C TOC		
LL	اللبا	Estimated Yield:40gpm Bore Hole Diameter:91/2in. to200				6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
1	S	Bore Hole Diai	meter:	in. to	ft. and	Other				
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID										
	Household 5. ☐ Public water Supply: Well II 6. ☐ Dewatering: how many well:									
ı —	□ Lawn & Garden Lawn & Garden Lawn & Garden Lawn & Garden Dewatering: now many wetts? Aquifer Recharge: well ID						☐ Cased ☐ Uncased ☐ Geotechnical			
. —	☐ Livestock Adulter Recharge: Well ID						12. Geothermal: how many bores?			
. —	☐ Irrigation 9. Environmental Remediation: well ID						a) Closed Loop Horizontal Vertical			
3. Feedlo							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:										
Was a chemical bacteriological sample submitted to KDTE: Tes Wo II yes, date sample was submitted.										
8 TYPE OF CASING USED: Steel PVC Other CASING IOINTS: Cloud O Clambad O Walded O Threaded										
Casing diameter 5 in to 175 ft. Diameter in to ft. Diameter in to ft										
8 TYPE OF CASING USED: Steel PVC Other										
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										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From 5 ft to 25 ft From ft to ft From ft to ft from ft to ft from ft from ft to ft from f										
Grout med vals. I fold										
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										
	Lines ight Sewer Lii			☐ Sewage La t ☐ Feedyard] Fuel Storage] Fertilizer Stora			VV CII	
Other (Specify)										
Direction fro	om well? NO	NE PRESENT		Distance from w	ell?		ft.			
10 FROM	TO			GIC LOG	FROM		THO. LOG (cont.) or P	LUGGIN	GINTERVALS	
0	9 E	BROWN CLAY								
9	31 L	IGHT BROWN CLA	·Υ							
31	52 L	IGHT YELLOW CL	AY			1		-		
52	85 L	IGHT BLUE CLAY				†				
85	158 F	ED & TAN CLAY							 	
158	201 8	ANDSTONE (GRA	Y/ FINE)							
			/		Notes:	<u> </u>				
	110005									
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) 9/13/2019 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 518 This Water Well Record was completed on (mo-day-year) 10/9/2019 under the business name of BLUE VALLEY DRILLING INC. Signature										
under the b	usiness name	e of BLUE VALLE	Y DRILI	LING INC.	S	ignature				
Mail	l white copy alo	ong with a fee of \$5.	00 for <u>ea</u>	<u>ch</u> constructed well to: Ka	nsas Departmer	it of Health and En	vironment, Bureau of Wate	er, GWTS S	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 htt	p://www.kdheks	.gov/waterwell/inde	x.html		KSA 82a-1	212		Kevised	7/10/2015	