WATER WELL R		orm WWC-5	Di	vision of Water		MW-22-2	
Original Record	Correction	Change in Well Use	Res	sources App. No.		Well ID	
1 LOCATION OF W		Fraction	Se	ction Number	Township Number		
County: Labe-		SE 12 NW12 NW		2	T 32 S	R ZO NE U W	
2 WELL OWNER: La		First	Street or Ri			if unknown, distance and	
Business: Day & Zimmerman Kansas LLC. direction from nearest town or intersection): If at owner's address, check here: [						's address, check here: 🗌	
Address 23102 Rush Road OSCO++ RA.							
City: Parsons	State	: KS ZIP: 67357	L Par	sons, 165	S .		
13 LUCATE WELL ( DEPTH OF COMPT PERP 1/4 6							
WITH "X" IN SECTION BOX. Depth(s) Groundwater Encountered: 1) S. S. ft.   5 Latitude: O. T. C. 1942 Co (decimal degrees Longitude: -95.183916) (decimal degrees Longitude: -95.183916)							
SECTION BOX:		. fl. 3) fl. or 4	1e:	(.!(decimal degrees)			
N	WELL'S STATE	C WATER LEVEL:		Fiorizonta Source fo	Horizontal Datum: \(\overline{\text{D}}\w\) GS 84 \(\overline{\text{NAD 83}}\) \(\overline{\text{NAD 27}}\) Source for Latitude/Longitude:		
×	below land:	surface, measured on (mo-de	ıy-yr)		(unit make/model: 4	phone 10	
NW NE	above land	above land surface, measured on (mo-day-yr)			(WAAS enabled? ☐ Yes XINo)		
	Pump test data:	Pump test data: Well water was			☐ Land Survey ☐ Topographic Map		
W		after hours pumping gpm Well water was ft			☐ Online Mapper:		
SW SE	after hours pumpinggpm						
	Estimated Yield:	Estimated Yield:gpm			6 Elevation:		
S	Bore Hole Diameter: in. to ft. and			Source: [	Source:  Land Survey GPS Topographic Map		
mile		in. to					
7 WELL WATER TO BE USED AS:							
1. Domestic:	5. 🔲 Put	olic Water Supply: well ID.	*******************	10. 🔲 Oil Fi	eld Water Supply: lea	se	
l-lousehold	6. ☐ Dev	vatering: how many wells?		II Test Hole	e: well ID		
☐ Lawn & Garden ☐ Livestock	/. ∐ Aqt	niter Recharge: well ID	☐ Uncased ☐ G	eotechnical			
2. Irrigation	7. Aquifer Recharge: well ID					   ++++================================	
3. Feedlot		Sparge Soil Vapo				i 🔲 Vertical charge 🔲 Inj. of Water	
4. 🔲 Industrial		overy Injection	DANACHON	I3. □ Other	(specify).	marge [ inj. of water	
777							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☒ No If yes, date sample was submitted:							
8 TYPE OF CASING USED: CISION WAY CONTROL CASING JOINTS. CONTROL CONTR							
Casing diameter							
Casing diameter							
TIFE OF SCREEN OR PERFORATION WATERIAL:							
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)							
☐ Brass ☐ Galvanized Steel ☐ Concrete file ☐ None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
E. Control of Care of Artispeed Control of Care of Control of Control of Control of Control of Care of							
Louvered Shutter							
GRAVEI PAC	K INTERVALS.	From 11 a n in 1	IL., From	It. 10	ft From	ft. to ft.	
9 GROUT MATERIAL	· Mant came	From	it From		ft From	ft. lo ft.	
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other 3/8 Hole 9/103 Grout Intervals: From 2 ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. of ft.							
Nearest source of possible contamination:							
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage							
☐ Sewer Lines	Cess l		_	Fuel Storage		ed Water Well	
□ Waterlight Sewer Lines □ Seepage Pit □ Feedward □ Fertilizer Storage □ Oil Well/Goe Well							
Other (Specify)  Direction from well?  Distance from well?							
10 FROM TO	**************************************	Distance from v	veil?				
	LITH	OLOGIC LOG	FROM	TO LIT	HO. LOG (cont.) or F	LUGGING INTERVALS	
	0 - 1 - N	Iravel road fill	•				
6 14	5:1+y CI				···		
	Cimestor	14					
1-1   W.D	Shale						
			- No.				
			Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, or plugged under my jurisdiction and was completed or (me day and constructed).							
under my jurisdiction and was completed on (mo-day-year) 08/20/2020. and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. 59.11 This Water Well Record was completed on (mo-day-year) 0.8.1242/2020 under the business name of Cascas Deciliary Annual Learning Signature							
Kansas Water Well Contr	actor's License	Vo. 59.7 This W	ater Well Rec	ans record is iff	req on (mo-qav-vea	NIOWICUSE AND DELICT.	
under the business name of	of Cascad	e. Drilling LP	Si	gnatureSte	ve Tohnson	1,,,,,,,,,,,,,,,,,,,,,,,	
1			いっこう ひくりないいけらけ	Of French and Char	EURROCHE, ISONOMO (III WAN	er Ciw is 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.kdhel.s.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015							