		KECOKD		W W C-5			ion of Wat	-		*** ** **	MW 23		
		Correction		e in Well Use			rces App. 1			Well II			
1 LOCATION OF WATER WELL:				Fraction	Secti	ection Number		Township Numb		ange Number			
County: Montgomery NE ¼ NE ¼ NE ½							12		T 33 S		15 <b>№</b> E □ W		
							treet or Rural Address where well is located (if unknown, distance and						
	· · · · · · · · · · · · · · · · · · ·						irection from nearest town or intersection): If at owner's address, check here:						
Address:		419 W	19 W College Ave, Independence, Kansas										
City:				•	,								
3 LOCAT	40				07.40575	.00							
WITH "				IPLETED WELL:									
	SECTION BOX: Depth(s) Groundwater Encountered: 1)						Long	itud	e: 95.7109	804	(decimal degrees)		
	$N = \{1, 2, \dots, tt., or 4\} \sqcup 1$						Datur	n: 🔲	WGS 84  NAI	D 83	] NAD 27		
	well's static water level:3.80								Latitude/Longitude				
'	below land surface, measured on (mo-day- above land surface, measured on (mo-day-								unit make/model:		,		
NW	above land surface, measured Pump test data: Well water was								(WAAS enabled?  Yes No)				
				pumping gpm			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:						
W	Well w			vater was ft.			☐ Опппе маррег						
SW				s pumping gpm					050				
	Estimated Yield:			gnm			6 Elevation: .850ft. ☑ Ground Level ☐ TOC						
	S Bore Hole Diameter:			6 in. to 18 ft. and			Source: $\Box$ Land Survey $\Box$ GPS $\Box$ Topographic Map						
1 r	nile	in. to	in. to ft.			Other KOLAR							
7 WELL WATER TO BE USED AS:													
1. Domestic:	1. Domestic: 5. Public Water Supply: well ID												
☐ Housel	☐ Household 6. ☐ Dewatering: how many wells?						11. Test	11. Test Hole: well ID					
☐ Lawn d		echarge: well ID	ge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical							
☐ Livesto									al: how many bores				
2.  Irrigati				al Remediation: well I					Loop  Horizont				
3. ☐ Feedlot ☐ Air Sparge				-			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													
8 TYPE OF CASING USED: ☐ Steel ☑ PVC ☐ Other													
Casing diameter 2 in to 3 ft., Diameter in to ft., Diameter in to ft. Diameter in to ft.  Casing height above land surface 0 in Weight lbs./ft. Wall thickness or gauge No. 40													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)													
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE:													
	nuous Slot	✓ Mill Slot							Other (Specify)				
	ered Shutter	☐ Key Pund	ched ∐ W	ire Wrapped	aw Cut	∐ No	ne (Open I	iole)	0 5	0			
				1.3 ft. to .18									
G.	RAVEL PA	CK INTERV	ALS: Fron	12ft. to18	? tt., F	rom	tt. t	0	ft., From	ft.	to ft.		
9 GROUT	MATERIA	AL:   Neat	cement _	Cement grout B	entonite	Oth	her .Y.Y!!!!!		0 4				
Monage gov	als: From		0	ft., From6	. II. IO		π., From		It. to	π.			
Septic			Lateral Line		mamman		iii 200 it. ivestock Pe	enc	☐ Insection	eide Stora	ige		
☐ Sewer			Cess Pool	☐ Sewage L	agoon		uel Storage		☐ Abando				
_	ight Sewer Li	_	Seepage Pit				ertilizer Sto						
Other (Specify)													
Direction fro	om well? So	outheast		Distance from v	vell? .25.				ft.				
10 FROM	TO		LITHOLOG		FRO		TO	LIT	HO. LOG (cont.) or	PLUGG	ING INTERVALS		
0	.5	Black Top											
.5	18	Sandstone	and Shale										
	Notes:												
11 CONT	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) .09/24/2019 and this record is true to the best of my knowledge and belief.												
under my ji	urisdiction a	and was comp	oleted on (n	no-day-year) .09/24/	2019	and th	nis record	is tru	e to the best of m	y knowle	edge and belief.		
Kansas Water Well Contractor's License No. 551. This Water Well Record was completed on (mo-day-year) 10/22/2019													
under the business name of Associated Environmental Industries Corp.  Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.													
KS Departs	ment of Health			ELL OWNER and retain							one 785-296-3565		

