WATER WELL R		WWC-5		sion of Water					
Original Record		ge in Well Use		urces App. No.	Taranahin Maraha	Well ID	>1		
1 LOCATION OF WATER WELL:		Fraction 1/4 NW 1/4	1	ion Number 18	Township Number		ge Number		
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: 2474 Old Hwy 169 2603 old Huy 169, Coffeyrille, KS								
Address:				Olex 11wy	tai, correspond	415			
City: Coffevville	State: KS	ZIP: 67337		1					
3 LOCATE WELL	4 DEPTH OF CO	MPLETED WELL:	24 ft.	5 Latitude	37.09238	3	(decimal degrees)		
WITH "X" IN SECTION BOX:	Depth(s) Groundwater	Depth(s) Groundwater Encountered: 1)				Longitude: 95.58564 (decimal degrees)			
N SECTION BUX.	2) ft.		al Datum: WGS 84						
	WELL'S STATIC WA	Source for	or Latitude/Longitude:						
'	☐ below land surface ☐ above land surface	■ GPS	(unit make/model:						
NW NE	Pump test data: Well		(WAAS enabled? <b>■</b> l Survey   ☐ Topogra		0)				
W E	after hour		Online Mapper:						
1 "	Well								
SW SE		after hours pumping							
					6 Elevation:				
S  1 mile	Bore Hole Diameter;	Bore Hole Diameter: 8.0 in. to 24 ft. and in. to							
7 WELL WATER TO BE USED AS:									
1. Domestic:		ater Supply: well ID		10 □ Oil F	ield Water Supply: Jea	ise			
☐ Household	5. ☐ Public Water Supply: well ID								
☐ Lawn & Garden		lecharge: well ID ng: well IDMW-		☐ Cased ☐ Uncased ☐ Geotechnical					
☐ Livestock					mal: how many bores?				
2. Irrigation		al Remediation: well ID			d Loop    Horizonta				
3. Feedlot	☐ Air Sparg		xtraction		Loop Surface Dis				
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 19 a	Diameter -	in to	f Diamete	Glued Clamped	weided	1 m Inreaded		
Casing diameter 2 in to 19 ft., Diameter in to ft. Casing height above land surface -0.4 in Weight but height was a 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 .24									
GRAVEL PACK INTERVALS: From									
9 CROUT MATERIAL: Next cement									
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other									
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									
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)									
Direction from well?									
10 FROM TO	LITHOLO	GIC LOG	FROM	TO L	THO. LOG (cont.) or	PLUGGIN	G INTERVALS		
0 20	Silty Clay, Brown		j i	ĺ					
20   24   1	Silty Clay /sand lens		1			_			
			1. 1						
			<u> </u>						
<del>                                     </del>			Notes:	<u> </u>					
			_ Motes:						
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) .5/2/20.17 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. 7.10									
Kansas Water Well Cor	ntractor's License No	(10 This Wa	ter Well Reco	ord was comp	leted on (mo-day-ve	ar) .5/10/2	2017		
under the business name	e of Pelow Ground S	ch constructed well to Van	Sig	nature	uiron want Duran of III	tor CAUTE S	ention		
under the business name of Below Ground Surface. Inc.  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		your records. Telephic		7/10/2015		