		RECORD		WWC-5			vision of Wa					
		Correction  VATER WEI	Change	e in Well Use			ources App.			Well ID		
		MAIER WEL		Fraction	NW.		ction Numb	er	Township Numb		ange Number	
2 WELL	OWNER:	Last Name: 24	There !	First A A	*/YU-	Street or Ru		s when	T S S		JEE W	
Business		ASC I VALLE	PRANG	First: AAI	אנע	direction from	nearest town	or inter	re well is localed section): If at owne	it unknow) r's address	n, distance and	
1	Address: 1562 Hulda											
Address: City: GOFF State: KS ZIP: 66428												
with '							t. 5 Latin	tude:	39039,	5981	(decimal degrees)	
SECTIO	ON BOX:		Depth(s) Groundwater Encountered: 1)				T. Longitude: 7.5 J Z. Z decimal degree					
]	N	WELL'S S	2) ft. 3) ft., or 4) Dry V WELL'S STATIC WATER LEVEL:				Datu	ım: 🔲	WGS 84 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	.D 83 □	NAD 27	
		below 1	below land surface, measured on (mo-day-yr).7.1241.						Latitude/Longitude		,	
NW	NE	above la	above land surface, measured on (mo-day-yr).					u) cac V)	unit make/model: WAAS enabled?	 7 Vac □	) Na)	
	1 1 1	Pump test da	Pump test data: Well water was					Land S	Survey Topogr	aphic Map	NG)	
w z	E	after	after hours pumping					Online	Mapper:			
sw	SE	after	Well water was									
		Estimated Y	Estimated Yield:				6 Elevation:ft. ☐ Ground Level ☐ TOC					
1	S		Bore Hole Diameter:				ft. and Source: Land Survey GPS Topog					
11	<u>'</u>			in. to					Other			
7 WELL WATER TO BE USED AS:												
				blic Water Supply: well ID			10. 🗆 0	il Fiel	ld Water Supply: le	ease		
☐ House	hold & Garden		<ul><li>6. ☐ Dewatering: how many wells?</li><li>7. ☐ Aquifer Recharge: well ID</li></ul>						well ID			
Livest				g: well ID					☐ Uncased ☐ ( al: how many bores			
2. Irrigat				l Remediation					Loop  Horizon			
3.  Feedle	ot		Air Sparge		il Vapor E		b) O	b) Open Loop Surface Discharge Inj. of Water				
4. 🗌 Indust	rial		Recovery	☐ Inje	ection		13. 🔲 0	other (s	specify):			
Was a chemical/bacteriological sample submitted to KDHE?  Yes  No If yes, date sample was submitted:												
Water well disinfected? The Yes No												
8 TYPE C	8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other											
Casing diameter 5												
TYPE OF SCREEN OR PERFORATION MATERIAL:  Weight												
☐ Steel		inless Steel	☐ Fiberg		PVC		□Ot	her (S	pecify)			
☐ Brass	Gal	vanized Steel	Concr	rete tile		sed (open hole		110: (~)	pccii, ,	•••••	•••••	
SCREEN OR PERFORATION OPENINGS ARE:												
	nuous Slot	☐ Mill Slot	Ga	uze Wrapped		ch Cut 🔲 I	rilled Holes		Other (Specify)			
	red Shutter	☐ Key Punch	ied ∐ Wi	ire Wrapped	Sav	v Cut \B	None (Open I	Hole)	2 -	•		
SCREEN-I	'EKTUKAI. Davei pa	CE INTERV	ALS: From	<b>υ</b> π.τ	خيرة ٥٠	lt., From . Λα Emm	II. t	io	ft., From	It. to	) ft.	
GRAVEL PACK INTERVALS: From Z. &. ft. to &. Oft., From ft. to ft., From ft. to ft.												
Grout Interv	als: From		28	ft From	f	to	ft. From	1	ft. to	A	•••••	
Nearest sou	rce of possib	le contamination	on:	160, 1 10		L. CO	161, 1 1011	1	16. 60	At-		
☐ Septic		_	Lateral Lines		t Privy		Livestock Pe			cide Storag		
Sewer		_	Cess Pool		wage Lag		Fuel Storage			oned Water		
☐ Watert	ight Sewer Li	_	Seepage Pit	_	edyard		Fertilizer Sta	-	_	ell/Gas Wel	i	
Direction fro		WEST		Distance	e from we	ii? <b>30</b>	/		ft.			
10 FROM	TO		ITHOLOG		b Hom we	FROM	ТО		HO. LOG (cont.) or		IG INTERVALS	
0	2		016						10. 200 (40)	T DO CO.	IO II I I I I I I I I I I I I I I I I I	
7.	74	YFILOS	UCLI	AY_								
24	26	BLUE	CLAY									
26	30	YELLOU	& CLK	24								
30	38	SAND	(FIW	-MEL	S. / Y.	ELLUW	<b>\</b>					
38	50	CAAY	SHA	LE	-							
						Notes:	Notes:					
						-						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This makes well												
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) 21.1.2.1.1.2.1.1.2.1.1.2.1.1.2.1.1.2.1.1.2.1												
Kansas Wa	ter Well Co	ntractor's Lice	nse No	57.8	This Wat	er Well Rec	cord was co	molete	ed on (mo-day-ye	ear)	LEZY	
under the b	usiness nam	e of	K.VA	LLEV.	RILL	1.N.G. Z	NC. 1	طنيون			•••••	
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.												
		eann and Environme heks.gov/waterwell/i		vater, Geology Se	etion, 1000 S	SW Jackson St., S KSA 82a-17		ia, Kansa	as 66612-1367. Telepho		3565. sed 9/10/2012	