		Correction		WWC-5 e in Well Use		vision of Wate ources App. N		Well ID	BMW-7	
1 LOCAT	FION OF V	VATER WEI		Fraction		ction Numbe		umber Rai	nge Number	
	y: Atchison			NE 1/4 NE 1/4 NE 1/4		2	T 6		0 🖪 E 🗆 W	
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:		SOO LIS 50 Highway					fic Avenue., Atchison, Ks.			
Address:			Status KS		1099 Facili	c Avenue.,	Alchison, KS.			
City: Atchison State: KS ZIP: 66002										
WITH "Y" IN 4 DEPTH OF COMPLETED WELL:								5734	.(decimal degrees)	
SECTIC	ON BOX:			Long	Longitude:					
1	$\begin{array}{c c} 2) \dots ft. & 3) \dots ft, \text{ or } 4 \square \text{ Dry Well} \\ \hline \\ WELL'S STATIC WATER LEVEL: 14.9 ft. \\ \end{array}$						e for Latitude/Longi		83 🗆 NAD 27	
		below l	below land surface, measured on (mo-day-yr).11/15/				PS (unit make/mode			
NW	🗋 above l	D above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.			•	(WAAS enabled? \Box Yes \Box No)				
				ater was ft pumping		Land Survey Topographic Map				
w	Well			vater was f			Online Mapper:			
				pumping		6 Elaur	6 Elevation: .843.8 Ground Level 🗆 TOC			
S Bore Hole Diameter			(ield:	8.75 in. to16.0	o Eleva	Source: Land Survey GPS Topographic Map				
S Bore Hole Diamete			Jiameter:	in. to	Sourc	Other				
7 WELL WATER TO BE USED AS:										
1. Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease										
	Household 6. Dewatering: how many wells?						11. Test Hole: well ID			
	Lawn & Garden7. □ Aquifer Recharge: well IDLivestock8. ■ Monitoring: well ID						□ Cased □ Uncased □ Geotechnical 12. Geothermal: how many bores?			
	2. □ Irrigation 9. Environmental Remediation: well ID a) Closed Loop □ Horizontal □ Vertical									
3. 🗌 Feedlo	3. 🗋 Feedlot 🗋 Air Sparge 🗋 Soil Vapor Extraction b) Open Loop 🗋 Surface Discharge 🗋 Inj. of] 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? Ves No										
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter										
Casing height above land surface										
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 .6 ft. to .16 ft., From ft. to ft. to ft. to ft.										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other cement pad Grout Intervals: From										
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) .contaminated site										
Direction from well?										
10 FROM	TO		LITHOLOG	GIC LOG	FROM	TO	LITHO. LOG (con	.) or PLUGGIN	IG INTERVALS	
0	0.3	Gravel, with								
0.3	4	Clay, red, m		h fine grained sand						
4	10	Cidy, Diack,	moist, wit	n line graineu sanu						
	Notes:							1		
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) .1.1/1.4/2022 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 604										
under the b	usiness nan	ne of Enviror	nmental P	riority Service, Inc.	S	ignature	rut ne	f Water Ciller	Section	
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.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										



