		RECORD		WWC-5		vision of W				MW 28	
				e in Well Use		sources App		E 1: N 1	Well ID	NT 1	
1 LOCATION OF WATER WELL:  County: Pottawotomie			Fraction NE 1/4 SE 1/4 SW 1/2						ge Number  E  W		
2 WELL	OWNER:	Last Name: USA	CE	First:	Street or R	ural Addre	al Address where well is located (if unknown, distance and				
	USACE 601 E 12	th St			direction from nearest town or intersection): If at owner's address, check here						
Address:				From Say Rd & Lewis Wilson Rd head North on Lewis Wilson Rd about 1000ft to cemetery on left. Near shed.					s Wilson Rd		
City: Kansas City State: MO  3 LOCATE WELL A DEPOTE OF COM-											
WITH "	X" IN		PLETED WELL:61.0 ft. ncountered: 1)44.2 ft.			5 Latitude: 39.220705259 (decimal degrees)  Longitude: -96.306080930 (decimal degrees)					
				3) ft., or 4) [		Lo Ho	Horizontal Datum: WGS 84 NAD 83 NAD 27				
1	`	WELL'S ST.	WELL'S STATIC WATER LEVEL:41.8				8 ft. Source for Latitude/Longitude:				
NIXI	NE		■ below land surface, measured on (mo-day-y above land surface, measured on (mo-day-y								
Pump test data: V			ta: Well w	vater wasN/A f	t.		■ Land Survey □ Topographic Map				
W E after			ter hours pumping g Well water was ft.			om Online Mar			Mapper:		
SW	SE	after	after hours pumpingg			6 Elevation: 1046.7ft. ☐ Ground Level ■ TOO					
X		Estimated Yi	Estimated Yield:N/Agpm Bore Hole Diameter:6 in. to61.0								
S Bore Hole Diameter: .			iameter:	in. to ft. and ft.				Other			
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. ☐ Public Wa				ter Supply: well ID		10. ☐ Oil Field Water Supply: lease					
☐ Household 6. ☐ Dewatering ☐ Lawn & Garden 7. ☐ Aquifer Re				g: how many wells? echarge: well ID		11. Te	11. Test Hole: well ID				
☐ Livestock 8. ■ Monitoring				g: well IDMV	12. Ge	12. Geothermal: how many bores?					
2. ☐ Irrigation 9. Environmental Reme				al Remediation: well II	)	a) Closed Loop    Horizontal    '				al	
3. ☐ Feedlot ☐ Air Sparge					☐ Soil Vapor Extraction b) Open Loop ☐ Surface Discharg						
4. Industrial Recovery Injection 13. Other (specify):											
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:											
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other											
Casing diameter											
TYPE OF SCREEN OR PERFORATION MATERIAL:         □ Steel       □ Stainless Steel       □ 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)											
SCREEN-PERFORATED INTERVALS: From .48.55. ft. to .58.55. ft., From											
GRAVEL PACK INTERVALS: From44.5. ft. to61.0. ft., From ft. to ft., From ft. to ft.											
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			ess Pool	☐ Sewage La ☐ Feedyard		Fuel Stor			oned Water W	Vell	
Other (Specify) .Forbes.S-7.Missile.Base											
Direction from well? West of well   Distance from well?											
10 FROM	TO		ITHOLOG	GIC LOG	FROM	TO		THO. LOG (cont.) or	PLUGGING	i INTERVALS	
0 14	14 18.8	Fat Clay Lean Clay			46 46.4	46.4 47.5		y Sand ndy Silt			
18.8	20.7	Sandy Silt			47.5	59.9	Sai				
20.7	28.3	Silty Sand			59.9	61		ndy Shale			
28.3	32.8	Silty Sandy C	lay								
32.8	36	Lean Clay									
36	42.7	Sandy Silt	Notes:								
42.7       45.6       Fat Clay       SPT Refusal @ 61.0         45.6       46       Sandy Silty											
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) .4/26/2023 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License NoN/A											
Kansas Wa	ter Well Co	ontractor's Lice	nse No. 🏻	VA This Wa	ater Well Re	ecord was	compl	eted on (mo-day-y	ear) .1/.1.0/29	024	
Mail	l white copy a	long with a fee of \$	5.00 for eac	of Engineers	S nsas Departme	ngnature nt of Health a	nd Env	ironment, Bureau of W	ater, GWTS Se	ection,	
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										7/10/2015	

