		RECORD		WWC-5				sion of Wate	. 1					
		Correction		e in Well U	se			irces App. N		75 11 37 1	Well			
1 LOCAT	rion of v /: Ottawa	Fraction NW1/4 NI	=1/ <b>NE</b> 1	/ \$NA/1/	Sect	ion Numbe								
	<del></del>	Clin												
2 WELL OWNER: Last Name: Cline Business:  Street or Rural Address where well is located (if unknown, distart direction from nearest town or intersection): If at owner's address, check														
	409 Oriole	Lane				unccuon.	110111 11	carest town of	HILL	iscellon). If at owne	1 3 audit	U33, C	HECK HEIC.	
Address:		,	State: KS	ZIP: 674										
City:	Minneap	olis		<del></del>										
3 LOCAT		4 DEPTH	OF COM	<b>1PLETED</b>	WELL:	118	ft.	ft. 5 Latitude: 39.11709 (decimal degrees)						
WITH "		Depth(s) Gr						Longitude: 97.69887 (decimal degrees)						
SECTION BOX:  N  2)								Datum	: 🗆	WGS 84 🛛 NA	D 83		AD 27	
WELL'S STATIC WATER LEVEL: 29 ft.										Latitude/Longitude				
							GPS (unit make/model:							
NW			(WAAS enabled?  Yes No)											
Pump test data: Well water was														
1	1 1	vater was					111111	e mapper			•••••			
SW	SE	after	after hours pumping gpm					1 4077						
		Estimated V	Estimated Vield: 100 apm						6 Elevation: 1277					
1	S	Bore Hole I	le Diameter: 9 in. to 120				ft. and Source: LL			Land Survey	Land Survey GPS Topographic Map			
1 mile  in. to ft. \( \square \) Other MYLAN														
7 WELL WATER TO BE USED AS:														
1. Domestic	Domestic: 5. ☐ Public Water Supply: well ID													
_	☐ Household 6. ☐ Dewatering: now many wells? 7. ☐ Aquifer Recharge: well ID									Uncased			, i	
_	☐ Livestock    Aquiter Recharge: Well ID									al: how many bore				
_	Divestock  6. ☐ Monitoring. Well ID  9. Environmental Remediation: well ID									Loop  Horizon				
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext									Loop Surface D				
4. Industrial Recovery Injection 13. Other (specify):														
Was a che	mical/bacte	riological san	nple subn	nitted to K	DHE?	Yes 🔽	No	If yes, date	sai	mple was submitte	:d:			
Water well	disinfected	7 17 Vec 17	No										1	
8 TYPE C	F CASINO	USED: S	teel Z PV	C Other		C	ASIN	G JOINTS	: <b>Z</b>	Glued Clampe in. to	d □ W	eldec	I ☐ Threaded	
Casing diam	eter5	in. to	.98 — <sub>ft.,</sub>	Diameter	<u>.</u> <u>.</u>	_in. to		ft., Diam	eter	in. to .		ft.	_	
Casing heigh	nt above land	surface	.24 ir	n. Weigh	t2.3	37 lbs	s./ft.	Wall thick	nes	s or gauge No214	٤			
TYPE OF S	SCREEN O	R PERFORAT	TION MA	TERIAL:										
☐ Steel		inless Steel			<b>☑</b> PVC	• .			er (	Specify)	********	• • • • • •		
Brass		vanized Steel			☐ None	used (oper	n hole	)						
		RATION OPE			.d 🗆 T	Conch Cut	пъ.	dlad Halas		Other (Specify)				
	nuous Slot	✓ Mill Slot  ☐ Key Punct								Other (Specify)				
SCREEN-I	PERFORAT	ED INTERV	ALS: From	n 98	i to 118	f F	mom	ft to	10 <i>1</i> 0,	ft., From	†	ft to	ft	
G	RAVELPA	CK INTERV	ALS: From	<sub>n</sub> 20	ft. to 11	8 A F	rom		)	ft., From	1	ft. to	ft.	
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other														
Nearest source of possible contamination:														
☐ Septic			Lateral Line		Pit Privy			Livestock Pe		☐ Insecti				
☐ Sewer			Cess Pool		Sewage L			Fuel Storage		☐ Aband			Well	
✓ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well														
☐ Other (Specify) Direction from well? N Distance from well? .100 ft.														
10 FROM	TO		LITHOLO			FRO				THO. LOG (cont.) o		GIN	G INTERVALS	
0	1	Topsoil			<del></del>									
1	12	Clay												
12	120	Sandstone												
						Note	s:							
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) .04/16/2013 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No138														
Kansas Wa	ater Well Co	ontractor's Lic	ense No	UD   IDC	This W	ater We	Kec	ora was col	mp)	exed on (mo-day-)	ear) .V:	H( J./,	( <del>4</del> 7.13	
under the b	usiness nan	Send one convit	OWATER V	VELL OWNE	R and retain	one for vo	ur reco	rds. Fee of \$4	<u>د.ب.</u> 5,00	for each constructed w	ell.			
KS Departi	ment of Health	and Environmen	t, Bureau of	Water, Geolog	y Section,	1000 SW Ja	ckson	St., Suite 420,	Top	eka, Kansas 66612-13	67. Tele	phone	÷ 785-296-3565.	
		ieks.gov/waterwe											SA 82a-1212	