WATER WELL RI		WWC-5		ision of Water		MW-17		
Original Record		ge in Well Use		urces App. No.		Well ID		
1 LOCATION OF WATER WELL:		Fraction Section SE 1/4 SE 1/4 NE 1/4 NE 1/4		tion Number	Township Number			
			the state of the s					
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business: Triplett, Inc		i d	direction from nearest town or intersection): If at owner's address, check here:					
Address: P.O. Box 647 I-70 & Hwy 283; Wakeeney, KS								
Address:	Audicas.							
City: Salina State: KS ZIP: 67402								
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:								
WITH "X" IN								
SECTION BOX:	Depth(s) Groundwater Encountered: 1) ft.				Longitude: 99.532669 (decimal degrees) Horizontal Datum: □ WGS 84 ■ NAD 83 □ NAD 27			
N	2)							
	below land surface, measured on (mo-day-yr)3-6-18					Source for Latitude/Longitude:		
					GPS (unit make/model:)			
NW NE				(WAAS enabled? ☐ Yes ■ No)				
		vater was ft.		☐ Land Survey ☐ Topographic Map				
W E		s pumpingg		☐ Online Mapper:				
SW SE	Well water was ft.							
	after hours pumping				n. 2445.36 ft	☐ Ground Level ■ TOC		
	Estimated Yield:	8.5 101	in to 101 th and Source:		■ Land Survey □ G	Land Survey GPS Topographic Map		
-	S Bore Hole Diameter: 8.5 in. to 101			Other				
7 WELL WATER TO BE USED AS:								
1. Domestic:		ater Supply: well ID				ıse		
Household		ng: how many wells?			le: well ID			
□ Lawn & Garden       7. □ Aquifer Recharge: well ID       □ Cased □ Uncased □ Geotec         □ Livestock       8. ■ Monitoring: well ID       12. Geothermal: how many bores?								
Livestock					mal: how many bores?			
2. Irrigation		al Remediation: well ID			ed Loop Horizonta			
3. Feedlot	☐ Air Sparg		xtraction			charge 🔲 Inj. of Water		
4. Industrial	☐ Recovery	☐ Injection		13. 🔲 Othe	r (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 USED: Steel PVC Uniter CASING JOINTS: Glued Clamped Welded Intreaded								
Casing diameter								
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 ft. to ft., From ft. to ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other								
Grout Intervals: From 0.5 ft. to 73 ft. From ft. to ft. From ft. to ft.								
Nearest source of possible contamination:								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage								
Sewer Lines	☐ Cess Pool			Fuel Storage		ned Water Well		
	ies			Fertilizer Stora				
Other (Specify)								
Direction from well?								
10 FROM TO	LITHOLO		FROM			PLUGGING INTERVALS		
	Concrete		11.0171	· · · · ·   · ·		JOO O INTERVALOR		
	Silty clay with trace s	and		<del> </del>				
			<del> </del>					
	Sandy clay with calic		<u></u>	ļ <u>ļ.</u>		**		
	Sand with gravel, calid							
	Sand with some cem							
73 81 0	Gravelly sand with ca	aliche and clay						
	Sand with trace clay		Notes:					
Wakeeney Travel Plaza Site: KDHE Project Code: U6-098-00782								
Wakeeliey Havel Flaza Site. Notic Floject Gode: 00-096-00/02								
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) .2/28/.18 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No. 881 This Water Well Record was completed on (mo-day-year) 4/1.7/18								
under the business name of Woofter Pump & Well  Mail I 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,								
Mail L white copy alo	ong with a fee of \$5.00 for es	ach constructed well to: Kan	sas Denartmen	t of Health and in	vironment Hireau of Wa	ter 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-1		ioi your records. Telepric	Revised 7/10/2015		
Tian us at mup.// www.kuncks	LEGY/ WATER WEIL/ HIGEX HITHI		120/1 02a-1.			110/10/2013		

