WATER WELL R		WWC-5	Div	vision of Water			
🔀 Original Record 🔲		nge in Well Use	Res	ources App. No.	<u> </u>	Well ID	
1 LOCATION OF W.		Fraction	Se Se	ction Number	Township Numb		
County: SALINE SEYSENSTINSWA 2 T 3 S R3 DE XW 2 WELL OWNER: Last Name: O First: Street or Rural Address where well is located (if unknown, distance and							
2 WELL OWNER: Last Name: Business: AND SCIALE CONSULTANTS 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: 1777 F	OLD HWY	/ NO					
Audiess.			15	90 U). Flumb	raegie Ro.	
	State: 7	S ZIP: 47401	140				
3 LOCATE WELL	4 DEPTH OF CO	MPLETED WELL:	. / <u>.</u> /ソソ f	5 Latitude	:	(decimal degrees)	
WITH "X" IN SECTION BOX:	Depth(s) Groundwate	r Encountered: 1) 🗸	<i>e.</i> C ft.	Longitu		(decimal degrees)	
N N	2)						
	WELL'S STATIC WATER LEVEL:(etc.)						
	above land surface, measured on (mo-day-yr).						
NW NE	Pump test data: Well		(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
W E	after hou		Online Mapper:				
	Well	water was	ft.				
SW SE		rs pumping	gpm	6 Flevatio	n· A	. ☐ Ground Level ☐ TOC	
	Estimated Yield:	gpm 10 in. to139	A4			GPS Topographic Map	
S mile	Bore Hole Diameter:	in to	π. and			Topograpine map	
1 mile Cother							
1. Domestic:		Vater Supply: well ID		10. □ Oil F	ield Water Supply: 1	ease	
Household		ing: how many wells?			e: well ID		
Lawn & Garden	7. Aquifer	Recharge: well ID			Uncased 🔲		
Livestock		ing: well ID			nal: how many bore		
2. Irrigation		ntal Remediation: well I			d Loop Horizon		
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Spar ☐ Recover		Extraction			scharge Inj. of Water	
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 diameter in. to							
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 • Q S ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)							
SCREEN-PERFORATED INTERVALS: From							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From							
Nearest source of possible contamination:							
☐ Septic Tank	☐ Lateral Li		_	Livestock Pens	☐ Insecti	cide Storage	
Sewer Lines	Cess Pool			Fuel Storage		oned Water Well	
Watertight Sewer Lin	es 🔲 Seepage P	it Feedyard		Fertilizer Storag	e ∐ Oil We	ll/Gas Well	
Other (Specify) Direction from well? SOUTH EAST Distance from well? ft.							
10 FROM TO		OGIC LOG	FROM	TO LI		PLUGGINGINTERVALS	
0 2	TOPSOIL.		108	140 5	HODSTON	ETAN	
26	BPOWN CL	AY					
	SANDSTON	L TAN		_			
23 23	SANDSTON						
25 30	SANDSTOK	E BED					
30 35	SANDSTON						
33 52	33 52 SHALK GRAY, Notes:						
52 95 SHALE GRAY YOS LAYEL							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged							
95 109	SHALL BA	AY		.;			
11 CONTRACTOR'S	SHALL GA OR LANDOWNER	'S CERTIFICATION	Y: This wate	r well was Do	onstructed, reco	onstructed, or plugged	
under my jurisdiction an	OR LANDOWNER d was completed on ('S CERTIFICATION mo-day-year) のサービ	7.7.1.10. and	this record is tr	ue to the best of m	y knowledge and belief.	
under my jurisdiction an Kansas Water Well Con under the business name	OR LANDOWNER d was completed on (tractor's License No.	'S CERTIFICATION mo-day-year) 0.4-0 This W	フール and ater Well Red たんれんだ Si	this record is trong ord was complemental ordered to the control of the control o	rue to the best of meted on smoothay-y	y knowledge and belief.	
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under my jurisdiction an Kansas Water Well Con under the business name Mail 1 white copy alor	OR LANDOWNER d was completed on (tractor's License No. of Pr. S. T. NO. G. M. ng with a fee of \$5.00 for e , Suite 420, Topeka, Kansa	rs CERTIFICATION mo-day-year) A	ater Well Red R. V. O. K. Sinsas Department	this record is to cord was comple gnature	rue to the best of meted on (mo)day-y	y knowledge and belief. ear) () () () () () () () () () (