_			WWC-5	Division of Water							
		Correction Chang	ge in Well Use Fraction			ces App. No.	T	Well ID			
1 LOCATION OF WATER WELL: County: Saline			SE¼ SW¼ SE¼		Sectio	n Number 10	Township Numb		nge Number		
	· Z	Last Name: Deathridge	First: Ed		Daniel						
	D&ERe		FIRST: LU	direction fr	eet or Rural Address where well is located (if unknown, distance and ction from nearest town or intersection): If at owner's address, check here:						
	Address: 2681 W. State St.										
Address			1	2148 Old	d Hwy	40, Salina					
City:	<u>Salina</u>	State: KS	ZIP: 67401	····							
3 LOCA		4 DEPTH OF COM	APLETED WELL: .								
WITH		Depth(s) Groundwater	Encountered: 1)2	2 _{ft}		Longitude: 97.6428194 (decimal degrees)					
2) ft.			3) ft., or 4) [n I	Datum: WGS 84 NAD 83 NAD 27					
		WELL'S STATIC WA	TER LEVEL:2	2 ft.	- 1	Source for Latitude/Langitude					
'		below land surface	below land surface, measured on (mo-day-yr). 12/23/2014				☐ GPS (unit make/model:)				
NW -	NE		above land surface, measured on (mo-day-yr) p test data: Well water was ft.				WAAS enabled? □				
						☐ Land Survey ☐ Topographic Map					
W	E	well v	after hours pumping gpm Well water was ft.			☐ Online Mapper:					
SW	SE	after hour	after hours pumpinggr			1					
L		Estimated Yield:12	Estimated Yield:12gpm			6 Elevation: 1231ft. ☑ Ground Level ☐ TOC					
	S	Bore Hole Diameter:	ft and Source: Land			Land Survey 🔲 🤇	and Survey GPS Topographic Man				
l mile			in. to				Other KOLAR				
7 WELL WATER TO BE USED AS:											
1. Domestic		5. Public Wa	ter Supply: well ID			10. 🔲 Oil Fi	eld Water Supply: le	ase			
	Household 6. Dewatering: how many wells?				••••	11. Test Hole: well ID					
	☐ Lawn & Garden 7. ☐ Aquifer Recharge						☐ Uncased ☐ G				
	☐ Livestock 8. ☐ Monitoring: well ID				•••	12. Geothermal: how many bores?					
	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E				••••	a) Close	Loop Horizonta	ıl ∐ Verti	ical		
4. Indust		☐ Recovery						cnarge	inj. or water		
To Guille (specify).											
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☑ No If yes, date sample was submitted:											
8 TVPF OF CASING USED: Steel I/O CASING USED: Steel I/O DV CASING ION TO Casing ION											
8 TYPE OF CASING USED: Steel PVC Other											
Casing diameter 5 in to 38 ft., Diameter in to ft. Casing height above land surface 12 in. Weight 2.37 lbs./ft. Wall thickness or gauge No. 214											
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 .38											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible contamination:											
☐ Sewer		☐ Lateral Line ☐ Cess Pool	s ☐ Pit Privy ☐ Sewage Lag			estock Pens	☐ Insectici				
	tight Sewer Li		☐ Sewage Lag			el Storage	☐ Abando		well		
☐ Other (Specify) Direction from well? West Distance from well? 80 ft.											
10 FROM	TO	LITHOLOG	GIC LOG	FROM			HO. LOG (cont.) or	PLUGGIN	GINTERVALS		
0		Bricks									
.5		Top Soil									
2		Clay, brown/gray									
35	65	Clay/Creek Gravel 50/									
65	79	Clay/Creek Gravel/Fin									
79	87	Shale, gray					· · · · · · · · · · · · · · · · · · ·				
	I			Notes:	-						
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) .12/23/2014 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on the day-year) 0.1/13/2015											
under the h	uct well Col	nuactor's License No!	an Inc	ter well h	kecord	was.comple	ted oncome day-ye	ar) .V.1(1.3	(4V.Ta		
under the 0	donicoo Halil	Send one copy to WATER W	ELL OWNER and retain o	ne for your	records	Fee of \$5.00	or each constructed well	<u></u>			
under the business name of Peterson Irrigation, Inc. Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.											
Visit us at http://www.kdneks.gov/waterwell-index.html KSA 82a-1212											