- /	WELL R			WWC-5		ision of Water		W-11 ID	
	Record TION OF W	ATER WEL	Change	e in Well Use		ources App. Notion Number		ber Range Number	
County	y: SAL	INF).L. ()	Fragtion SW4NE14		25	T/4/S	RJ □E WW	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and									
Business: ST. MALY'S SCHOOL Address: 304 E. CLOND direction from nearest town or intersection): If at owner's address, check here:									
Audicss.	_			(0 , 0)	304	E. (LOUD		
City:	JALIN			ZIP:(4)401					
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						5 ft. 5 Latitude:(decimal degrees)			
ſ	SECTION BOX: Depth(s) Groundwater Encountered: 1) < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < < <								
•	2) ft. 3) ft., or 4) \(\sqrt{WELL'S STATIC WATER LEVEL:					į.	: □ WGS 84 □ NA		
		below land surface, measured on (mo-day-yr)					for Latitude/Longitud	<u>e</u> :)	
N W	NE	above la	and surface,	measured on (mo-day-	yr)	. "	(WAAS enabled? [
		Pump test da	ata: Well w	vater wasfl	•	☐ Land Survey ☐ Topographic Map			
w	Е	after				Oı	nline Mapper:	••••••	
sw	SE	after hours pumping gr					 		
		Estimated Yield:gpm Bore Hole Diameter:in. to5-9							
	S	Bore Hole Diameter: 1.0 in. to 97			. ft. and	Source: Land Survey GPS Topographic Map			
1 mile in. to ft.									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
☐ House		6. Dewatering: how many wells?							
	& Garden	7. 🗆	7. Aquifer Recharge: well ID						
	Livestock 8. Monitoring: well ID					· · · · · · · · · · · · · · · · · · ·			
	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E								
4. Industr			Recovery		Audenon				
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:									
Water well disinfected? XYes \(\sum \text{No} \)									
8 TYPE OF CASING USED: Steel XPVC Other CASING JOINTS: YGlued Clamped Welded Threaded Casing diameter ft., Diameter in. to ft., Diameter ft., Diameter ft.									
Casing diameter O in. to 7.7. ft., Diameter in. to ft., Diameter in. to ft.									
Casing height above land surface									
Steel Steinless Steel Fiberglass ✓✓PVC Other (Specify)									
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
☐ Continuous Slot Mill Slot, ONO ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)									
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Sentonite Other									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well									
₩ Watertight Sewer Lines									
Other (Specify)									
Direction fro							····		
10 FROM	TO 4	FILL DI	ITHOLOG	alt LUG	FROM	TO	LITHO. LOG (cont.) c	or PLUGGING INTERVALS	
4	30			FIEM					
30	59			O MED. TAK)				
39		SHALE							
				.,	NT - 4 -				
					Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, [reconstructed, or] plugged									
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) 22									
Kansas Water Well Contractor's License No. 377 This Water Well Record was completed on (mo-day-year) 0.1.30									
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas 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.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012									