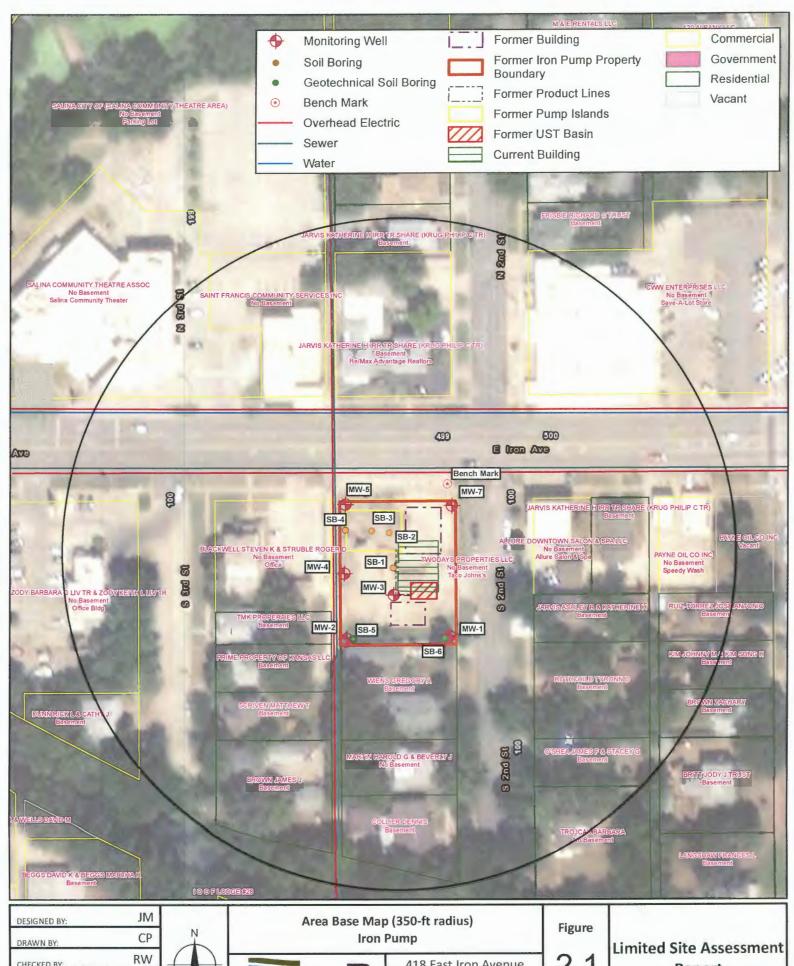
		RECORD		WWC-5		vision of Wat			MW-5	
		Correction		e in Well Use		ources App.		Well ID	- an Number	
		VATER WEI	L:	Fraction	1	ction Numb 13	er Township Numl T 14 S		nge Number B □ E ■ W	
	y: Saline		_1	SW¼ NE¼ NE¼						
	OWNER: Palak, Ll	Last Name: Pat	е	First: Kiritkumar	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:					
Address: 418 E iron Ave.									_	
Address:										
City:	Salina		State: KS	ZIP: 67401						
3 LOCAT		4 DEPTH	I OF COM	APLETED WELL: .	35 f	t. 5 Latit	tude: 38.840	41	.(decimal degrees)	
,	WITH "X" IN SECTION BOX: Depth(s) Groundwater E					Long	Longitude: -97.60494 (decimal degrees) Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27			
_	N	2)	ft. 3	3) ft., or 4) [Dry Well				83 LI NAD 27	
WELL STATIC WA			IAIIC WA	TER LEVEL: 25	.vr) 10-24-201	9 Source	Source for Latitude/Longitude: GPS (unit make/model:)			
NWNE □ above land su			and surface	, measured on (mo-day-	yr)	.	(WAAS enabled? Yes No)			
Pump test data: W			lata: Well w	vater was f	t.	Di	☐ Land Survey ☐ Topographic Map			
w ×	" 🗸			oumping gpm						
	SE	after	vater was 1							
	Estimated Yield:			gnm	6 Elevatio			t. 🗌 Groun	d Level 🔳 TOC	
S Bore Hole Diameter:			8.75 in to 35	ft. and	Source	Source: Land Survey GPS Topographic Map				
1 mile in. to ft. Uther										
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID										
1. Domestic				iter Supply: well ID ig: how many wells?						
☐ Household 6. ☐ Dewaterin			echarge: well ID			11. Test Hole: well ID				
Livestock 8. Monitoring				charge: well ID						
2. Irrigation 9. Environmental				al Remediation: well II	a) Closed Loop Horizontal Vertical					
			e 🔲 Soil Vapor l							
4. Industrial Recovery Injection 13. Other (specify):										
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:										
Water well disinfected? Yes No CASING IONES: CAS										
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 2 in to 90 ft Diameter in to ft Diameter in to ft										
Casing diameter 2 in to 20 ft., Diameter in to ft. Diameter in to ft. Casing height above land surface 0 in. Weight lbs/ft. Wall thickness or gauge No. Sch. 40										
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										
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From .20										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other										
Grout Intervals: From 0 ft. to .18 ft., From ft. to ft., From ft. to ft.										
Nearest source of possible contamination: Septic Tank										
Sewer			Cess Pool	Sewage La		Fuel Storage		loned Water		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well										
Other (Specify)										
Direction from well? Distance from well? ft.								IC INITEDWALC		
10 FROM 0	10				FROM	TO				
<u> </u>		plastic, no o		, moist to wet,	22	23 25	Clay, gray, wet to see Sand, light brown, f			
10	13	Silt, dark bro		v. moist	25	35	Sand, light brown, r			
13	15			n, silty, moist	 -		sorted, saturated, s			
		no odor	, , , , , , , , , , , , , , , , , , ,		1					
15	19		to gray, w	et to saturated.		1				
		silty, no odo			Notes:	KOHE U	5-085-15072			
22 Sand, orange to brown, fine grain, moist										
no odor 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged										
11 CONT	RACTOR'	S OR LAND	UWNER'S	S CERTIFICATION	i: This wate	this record	constructed, \(\square \text{rec} \)	onstructed,	, or ∐ plugged loe and belief	
Kansas W	urisuiciion a ster Well Co	aiu was comp intractor's Lie	ense No 6	10-uay-year) .197497 104 This W	ter Well Re	cord was co	is true to the best of n appleted on (mo-day-y	rear)1.2	215/19	
under the h	ousiness nan	ne of Environ	rmental Pr	riority Service, Inc.,	S	ignature	P.M.A. Mt			
Mail	1 white copy a	long with a fee of	\$5.00 for eac	ch constructed well to: Kar	sas Departmen	t of Health and	i Environment, Bureau of V	Vater, 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.kdhcks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										



CHECKED BY CC FEBRUARY 2020





418 East Iron Avenue Salina, Kansas U5-085-15072

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Report