WATER WELL R	Form WWC-5 Correction Change in Well Use		sion of Water arces App. No.	w	ell ID	
i LOCATION OF W				Township Number	Range Number	
County: SAL	INE SWYJWY		17	T / S S	R Q □ E X W	
2 WELL OWNER: La Business:	ast Name: NICHOLS First: Scot	Street or Rura		well is located (if usection): If at owner's ac		
Address: 2625	E. MENTON RD.			'	_	
Address: ASSARII	A State. X ZIP: 6741	16 268	5 E. M	TENTON H	D	
3 LOCATE WELL	, , , , , , , , , , , , , , , , , , , ,		5.5			
WITH "X" IN	4 DEPTH OF COMPLETED WE Depth(s) Groundwater Encountered: 1)	f f	1		(decimal degrees)	
SECTION BOX:	2) ft. 3) ft., o			VGS 84 □ NAD 83	(decimal degrees)	
1	WELL'S STATIC WATER LEVEL:			Source for Latitude/Longitude:		
	below land surface, measured on (mo-day-yr)			/		
NW NE	above land surface, measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ☐ No)		
w E	E after			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:		
	Well water was ft.			•паррет		
SW SE	atter Hours pumping			6 Elevation:ft. Ground Level TOC		
S	Estimated Yield:gpm Bore Hole Diameter:9 in. to55 ft. and		Source: Land Survey GPS Topographic Map			
mile	in. to	ft.			- robogadom	
7 WELL WATER TO BE USED AS:						
1. Domestic:	5. Public Water Supply: well	ID		Water Supply: lease		
Household	6. Dewatering: how many wells?		11. Test Hole: well ID			
☐ Lawn & Garden X Livestock	7. ☐ Aquifer Recharge: well ID		☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID		a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction		b) Open Loop Surface Discharge Inj. of Water			
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? Xyes No						
8 TYPE OF CASING USED: Steel PVC Other						
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						
United Houvered Shutter I Key Punched I Wire Wrapped I Saw Cut I None (Open Hole)						
SCREEN-PERFORATED INTERVALS: From						
GRAVEL PACK INTERVALS: From						
Nearest source of possible contamination:						
☐ Septic Tank	☐ Lateral Lines ☐ Pit P		ivestock Pens	☐ Insecticide		
☐ Sewer Lines ☐ Watertight Sewer Lir			uel Storage ertilizer Storage	☐ Abandoned ☐ Oil Well/Ga		
	nies 🔲 seepage Fit 🔲 Feet	-	C	□ Oii weii/Ga	is well	
Direction from well? WOLTH. Distance from well? ft.						
10 FROM TO	LITHOLOGIC LOG	FROM	TO LITH	O. LOG (cont.) or PLU	JGGING INTERVALS	
	TOP SOIL					
22 38	CLAY GRAY SOFT					
38 50		ETAN				
37 38 38 50		ARD				
Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ★ constructed, ☐ reconstructed, or ☐ plugged						
under my jurisdiction ar	nd was completed on (mo-day-year) / L	and th	his record is true	to the best of my kn	nowledge and belief.	
Kansas Water Well Con	ntractor's License No. 38	his Water Well Reco	ord was complete	ed on (mo-day-year)	10-31-13	
Kansas Water Well Contractor's License No. 36. This Water Well Record was completed on (mo-day-year) 10.37. Water Well Record was completed on						
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.						

KSA 82a-1212

Revised 9/10/2012

Visit us at http://www.kdheks.gov/waterwell/index.html