		L RECORD		WWC-5		Division of V			,			
		Correction	☐ Chan	e in Well Use		esources Ap			Well ID			
		WATER WEI	ılı: ,	Fraction		Section Nun	nber	Township Numb		ige Number		
	nty: Bartor			1/4 SW 1/4 SE 1/		15		T 17 S	R 13	3 🗆 E 🔳 W		
		R: Last Name: er Brothers, Inc		First:	Street or I	Rural Addre	ess wher	e well is located	(if unknown,	distance and		
		NE 20th Avenue										
Addres	SS:	AL ZOUT MACII	ue		3 North, 1	1/4 East	of Hoisi	ington				
City:	Hoisin	aton	State: KS	ZIP: 67544				_				
	TE WELL	4 DEPTH	OF COM	IDI ETEN WELL.	120	A 6 T	4*4	38 5653	0			
	WITH "X" IN SECTION ROX. 4 DEPTH OF COMPLETED WELL:							5 Latitude: 38.56539 (decimal degrees) Longitude: 98.74301 (decimal degrees)				
SECT	SECTION BOX: N Depun(s) Groundwater Encountered: 1)							:	V.I	(decimal degrees		
	WELL'S STATIC WATER LEVEL: 20 ft.						rizoniai I	Datum: WGS 84	MAD RAD	83 LI NAD 27		
				measured on (mo-day		9	GPS (an	nit make/model:				
NW	NW NE Dabove land surface, measured on (mo-day-yr)							■ GPS (unit make/model:				
1 1 1	Pump test data: Well water was ft.							☐ Land Survey ☐ Topographic Map				
W	E after hours pumpinggpm							Online Mapper:				
sw-	Well water was											
1 1 1	after hours pumping						vation.	A	Cround	Lavel ELTOC		
	S Bore Hole Diameter:10 in. to120				fron fr	6 Elevation:ft. ☐ Ground Level ☐ TOO Source: ☐ Land Survey ☐ GPS ☐ Topographic Map						
[]							Other					
7 WELL WATER TO BE USED AS:												
1. Domesti				ter Supply: well ID		10 🖂	Oil Field	Water Supply: lea	100			
☐ Hous	ehold	6. 🗆	Dewatering	g: how many wells?		. 10. 🗀	st Hole:	well ID	330			
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID						☐ Cased ☐ Uncased ☐ Geotechnical					
Lives	estock 8. Monitoring: well ID						othermal:	: how many bores?)			
2. Irriga	<u> </u>						a) Closed Loop					
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction						b) Open Loop Surface Discharge Ini. of Water					
4. 🔲 Indus			Recovery	☐ Injection		13. 🗆	Other (sp	ecify):	************			
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 5 in. to 120 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft.												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 5 in to 120 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 18 in. Weight SDR-26 lbs./ft. Wall thickness or gauge No.												
TIPE 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)												
SCREEN-PERFORATED INTERVALS: From 120 ft to 80 ft From 60 ft to 50 ft From 60												
GRAVEL PACK INTERVALS: From 120 ft. to 20 ft., From ft. to ft.												
9 GROUT MATERIAL: Next cement												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other. Grout Intervals: From ft. to ft., From 20 ft., From ft.												
Nearest source of possible contamination:												
☐ Septic		☐ La	teral Lines	☐ Pit Privy		Livestock P	ens	☐ Insecticid	le Storage			
☐ Sewer			ess Pool	☐ Sewage Lag	oon 🗀	Fuel Storag	ge	☐ Abandon	ed Water W	ell		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well												
Other (Specify) Creek												
10 FROM	TO							ft.				
0	2		FHOLOGI	CLOG	FROM	ТО	LITHO	D. LOG (cont.) or P.	LUGGING	INTERVALS		
2	17	Top soil			65	69	Fire cla					
17	27	Brown clay	alore.		69	80	vvhite	clay w/ sandsto	ne streaks	3		
27		Gray & white o			80	85	Fire cla		RECE	VED		
30	30 37		ken rock & clay		85	87	White			V Labor		
37		Gray clay		also also	87	98		tone- fine to coa		0010		
42	42 54	Gray clay w/ s	anusione	streaks	98	120	Fire cla	ay w/ sandstone	streaks	2019		
42 54	59	Fire clay			Notes:							
	BUREAU OF WAIL									F WATER		
59 65 Sandy dray clay												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo-day-year) 9-11-19 and this record is true to the best of my knowledge and belief.												
ixalisas vva	ier wen Co	ntractor's Licens	se ivo	Jet Into Wate	er Well Rec	OTA WAS CO	mpleted	on (ma day yraan	1 0 17	40 I		
anaci are or	usiness nan	16 OT 17732110	I ALLIZ-LDE	IIIIS EIL IIIC	SI	onafiire (10011				
IVIZII I	with copy at	ong with a ree or \$5.	uu for each c	onstructed well to: Kansa	s Department	of Health and	Environm	ent. Bureau of Water	GWTS Sect	ion		
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, 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.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015												