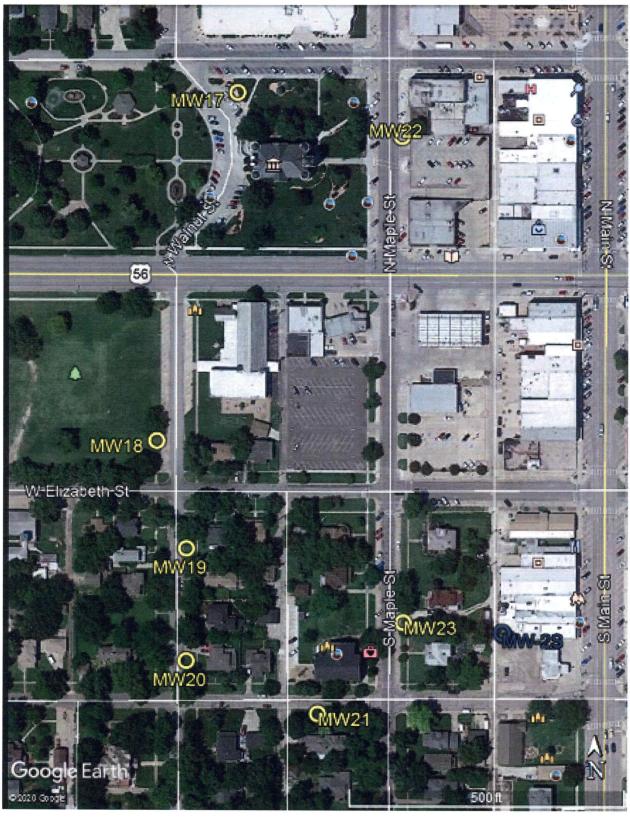
Revision

	WELLE		Form V			vision of Wate	1]	MW19	
		Correction	Change	in Well Use		ources App. N		Well ID	37 1	
	YON OF Ware the second of the	VATER WE	LL:	Fraction SE 1/4 NW 1/4 NE 1/2		ction Numbe 29	r Township Num T 19 5		ge Number □ E ■ W	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and										
Business: Mid Kansas Coop						direction from nearest town or intersection): If at owner's address, check here:				
Address: PO Box D Address:						95' S & 8' E of SE corner of Walnut & Elizabeth, McPherson				
City:		lao	State: KS	7ID: 67107	-90 0 0 0	L Of SL CO	Hel Of Wallful & L	nzabetn, ivic	rheison	
3 LOCATE WELL										
WITH				PLETED WELL:			de: 38.367			
1000001 10000001 1000000	ON BOX:			ncountered: 1)		Longi	tude:97.66	3953	decimal degrees)	
2)					Dry Well	Horizo	ntal Datum: 🚟 WGS	84 🗆 NAD 8	3 □ NAD 27	
	below land surface, measured on (mo-da						for Latitude/Longitude			
NWNE above land surface, measured on (mo-day					-yr). 44.37.54/ -vr)	مم □ Gi	PS (unit make/model:			
Pump test data: Well water was						······· (WAAS enabled? ☐ Yes ☐ No) Backgraphic Map				
w	y E after hours pumping					Online Mapper:				
537	10	1	Well w	ater was	ft.		mine ivapper,			
SW	after hours pumping gpm									
	Estimated Yield:gpm Bore Hole Diameter:9 in. to12					6 Elevation: 1498.38ft. Ground Level TOC				
S Bore Hole Diameter:			9 in. to!40.	ft. and	Source	Source:				
The Comment of the Co										
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID										
☐ Household 5. ☐ Public water supply: well ID 6. ☐ Dewatering: how many wells?										
						∏ Ca	sed Uncased			
☐ Livest	☐ Lawn & Garden ☐ Livestock 7. ☐ Aquifer Recharge: well ID					12. Geoth	ermal: how many bor			
2. 🗆 Irrigation 9. Environmental Remediation: well ID					D		sed Loop 🔲 Horizo			
77500	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E					b) Op	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? ☐ Yes 👼 No										
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other										
Casing diameter										
Casing neight 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										
SCREEN-PERFORATED INTERVALS: From 90										
GRAVEL PACK INTERVALS: From 85 ft. to 120 ft., From ft. to ft., From ft. to ft.										
9 GROUT MATERIAL: Neat cement Cement grout Rentonite Other Concrete										
Grout Intervals: From U ft. to .0.5 ft., From .0.5 ft. to 85 ft., From ft. to ft.										
Nearest source of possible contamination:										
☐ Septic			Lateral Lines			Livestock Per		icide Storage		
Sewer			Ccss Pool	☐ Sewage La		Fuel Storage		doned Water V	Vell	
☐ Watertight Sewer Lincs ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify) Direction from well? Distance from well? ft.										
10 FROM	ТО		LITHOLOG	IC LOG	FROM		LITHO. LOG (cont.)		MITERVALS	
0		Clay, silty, N			1 ICOIVI	10	ELTITO, LOG (COIII.) (V I POOQUIAC	MATERAMES	
5	7	Clay, little s								
8		Clay, Tan	in, Et. Dion	11						
50		Clay, Gray,	m-c sand s	treaks						
72			Sand, m-c w/some f streaks							
95			Sand, f-c, sm. Brown clay streaks			-				
100		Sand, rec, si		iaj sucars	Notes:	<u> </u>				
	1.2		J., JUILOU		1,000					
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) 1/8/2020 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo-day-year) 2/5/2020										
under the business name of GeoCore, LLC Signature Signature										
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.										



Mid Kansas Coop, McPherson 100 S. Maple, McPherson

GPS Coordinates:

MW17: 38.37023, -97.66921 MW18: 38.36852, -97.66972 MW19: 38.36798, -97.66953 MW20: 38.36743, -97.66954 MW21: 38.36716, -97.66870 MW22: 38.37005, -97.66819 MW23: 38.36761, -97.66818