		RECORD	Form '	WWC-5	D	ivision of Wa	ater		1	1			
		Correction		ge in Well Use		sources App			Well ID				
1 LOCAT	TION OF V	VATER WEI	L L :	Fraction		ection Num	ber	Township Num		nge Nu			
County	y: Ner	ton		NW4SE4 NE	4 NET	32		/ T / S			E ·W		
2 WELL	OWNER:	Last Name: し	ee	First: Art				ere well is located					
Business	Po Box	25		•	direction from	n nearest town	or inte	ersection): If at own	er's address,	check I	nere: 🔲		
Address: City: Legg Island State: KS ZIP: 67647 & M north of Boads on Road E9													
	ciqTs	land	State: K	S ZIP: 67647	5MI	north a	s F	Boads	on Ro	4 d	Eq		
3 LOCAT	E WELL	1			C'C	l l							
l .	WITH "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL Depth(s) Groundwater Encountered: 1)				. <u></u>	_:							
l .	θ 3) θ or 4) θ Drs						Longitude:						
]	WELL'S STATIC WATER LEVEL:							Source for Latitude/Longitude:					
	below land surface, measured on (mo-day-yr).							unit make/model:					
above land surface, measured Pump test data: Well water was								(WAAS enabled? ☐ Yes ☐ No)					
			Pump test data: Well water wasft.				☐ Land Survey ☐ Topographic Map						
				. hours pumping gpm			Online Mapper:						
				water was		-							
l I i	1 1 1		after hours pumping gpm nated Yield: Cress B. gpm			6 Ele	6 Elevation:ft. ☐ Ground Level ☐ TOC						
L L	S		Bore Hole Diameter:			Source: Land Survey GPS Topographic M							
	mile	Boie Hole		in. to ft.			Other						
7 WELL WATER TO BE USED AS:													
1. Domestic				ater Supply: well ID		. 10.	Oil Fie	eld Water Supply:	lease				
_	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID						
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID							☐ Uncased ☐					
	☐ Livestock 8. ☐ Monitoring: well ID							nal: how many bor					
	2. Irrigation 9. Environmental Remediation: well ID							Loop Horizo			C 11/-4		
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor F 4. ☐ Industrial ☐ Recovery ☐ Injection							b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 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													
o if the UP CASING USED: ☐ Steel ☐ PVC ☐ Other													
Casing diameter													
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 ☐ Mill Slot ☐ 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 Bentonite Other													
Grout Intervals: From													
Nearest source of possible contamination: ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage													
☐ Sewer			Cess Pool			Livestock Fuel Storag			_				
□ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well													
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)													
	om well?	<u></u>		Distance from v	vell? Q Y.	O.K.n.d.		f	ì.				
10 FROM	TO	I	LITHOLO	GIC LOG	FROM	TO	LIT	HO. LOG (cont.)	or PLUGGIN	G INT	ERVALS		
0	23	soil											
13	40	Sandy	0/9	y									
40	10	clay!											
60	90	sand					<u> </u>						
90	95	shale	<u> </u>				1						
							1						
					Notes:								
					_			•					
11 CONT	KACTOR'	S OR LANDO	UWNER'S	S CERTIFICATIO	N: This wat	er well was	C) سه وزا	onstructed, \sqsubseteq rec	onstructed,	or ∐ or	piugged		
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)													
under the b	usiness nam	ورو و ان e of	7.sc. h.a	l.KW.a.T.E.	irV.Q.1.	1 <i>Dr.1</i> .	1.1.1.	n.9		<u></u>			
under the business name of Gottsch.g. K W.c. T. E. w. W. E Dr. M. G Gottsch.g. K W. E W. E Dr. M. G Gottsch.g. K W. E W. E Dr. M. G Gottsch.g.													
	Department of H	ealth and Environm	nent, Bureau of	Water, Geology Section, 100	00 SW Jackson St.	., Suite 420, Top	eka, Kai	nsas 66612-1367. Telep	hone (785) 296-	3565. sed 9/10/2			
VISITUS	at http://www.kd	heks.gov/waterwell	ringex.ntml		KSA 82a	-1414			KCVI	JUL 7/ 10/2			

KSA 82a-1212

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