| | WELL F | RECORD Correction | | WWC-5 | | | rision of Wat | 1 | | Well II | | |
|---|---|---------------------|--|---------------------|------------------------------------|-----------------------------------|---|-----------|---------------------------------|---------------|------------------|--|
| | | ATER WEL | | Fraction | | | ction Numb | | Township Numb | | lange Number | |
| | y: JEWELL | 1/4 NW 1/ | 4 NW 1/4 | 10 | • | T 1 S | | 6 □ E ⊠ W | | | | |
| 2 WELL OWNER: Last Name: HEITMAN First: KEN Street or Rural Addre | | | | | | | | | | (if unkno | wn, distance and | |
| Business | | | direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | | |
| Address: | Address: 2775 DIAMOND ROAD Address: | | | | | | 280 RD AND DIAMOND RD NORTH EAST OF WEBBER KS | | | | | |
| City: | WEBBER | 2 | State: KS | ZIP: 6697 | 0 | APPR. 7 MILES | | | | | | |
| 3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 50 ft. 5 Latitude: 39.9791844 (decimal degr | | | | | | | | | | | | |
| WITH " | | | | | | | | | | | | |
| | SECTION BOX: Depth(s) Groundwater Encountered: 1) | | | | | | | | | | | |
| WELL'S STATIC WATER LEVEL: | | | | | | 10 Source for Latitude/Longitude: | | | | | | |
| | | ı — | | * | | /-yr) | . | GPS (| unit make/model: | |) | |
| NW | - NW NE - □ above land surface, measured on (mo-da Pump test data: Well water was22 | | | | | | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | |
| w | 1 | | | | | | Dand Survey ☐ Topographic Map ☐ Online Mapper: | | | | | |
| 1 1 | 1 ' 1 | | Well water was | | | | | | | | | |
| SW | SE | after hours pumping | | | | . gpm | 6 Elevation:ft. ☐ Ground Level | | | | and Lavel D TOC | |
| | Estimated Yield:3gpm Bore Hole Diameter: in. to | | | | | | | | Land Survey | | | |
| | S mile | Bore Hole I | | meter: in. to it. a | | | Other | | | | | |
| | | D BE USED A | | | | | | | | | | |
| 1. Domestic | | | ater Supply: v | vell ID | 10. Oil Field Water Supply: lease | | | | | | | |
| _ | ☐ Household 6. ☐ Dewatering: how many wells: | | | | | | 11. Test Hole: well ID | | | | | |
| | □ Lawn & Garden 7. □ Aquifer Recharge: well ID ■ Livestock 8. □ Monitoring: well ID | | | | | | | | | | | |
| 2. Irrigat | | | | | | | | | l Loop Horizon | | | |
| | 2. ☐ Irrigation 9. Environmental Remediation: well I 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor | | | | | | 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 height above land surface | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | ft. to | | | |
| Nearest source of possible contamination: | | | | | | | | | | | | |
| ☐ Septic☐ Sewer | | | Lateral Lir Cess Pool | | Pit Privy Sewage L | _ | Livestock P Fuel Storage | | ☐ Insecti ☐ Abanc | | | |
| □ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well | | | | | | | | | | | | |
| ☐ Other (Specify) Direction from well? Distance from well? ft. | | | | | | | | | | | | |
| | | | | | ce from v | | | | | | DIC DITERIALS | |
| 10 FROM | TO | | THOLO | GIC LOG | | FROM | ТО | LIT | HO. LOG (cont.) o | r PLUGG | ING INTERVALS | |
| 1 | | TOP SOIL MED SAND | AND GE | 2Δ\/FI | | | | | | | | |
| 18 | | MED TO FIN | | | | | | | | | | |
| 23 | | FINE SAND | | | -110-7 | | , | | | | | |
| 28/ | | GRAY CLAY | | | | | | | | | | |
| 40 | | SHALE | | | | | | | | | | |
| | | | | | | Notes: | | | | | | |
| | | | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged | | | | | | | | | | | | |
| under my | WACTOR'S | nd was comp | leted on (| mo-dav-vear | 10-28 | -2014 and | this record | is tr | ue to the best of ∞ | w knowl | edge and belief | |
| Kansas Wa | ater Well Co | ntractor's Lic | ense No. | 480 | This W | ater Well Re | cord was co | tiple | to the best of geted by (model) | ear) .07. | 20/2015 | |
| under the b | ousiness nam | e of WILLIA | <u>MS.DRI</u> | LLING CO | INC | S | ignature\. | 10 | y WMMi | am | 2 | |
| Mail I 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. | | | | | | | | | | | | |
| | | | | | | | | | | sed 7/10/2015 | | |