WATER WELL R			WWC-5		vision of Water		MW-9	
Original Record			e in Well Use		ources App. No		Well ID	
1 LOCATION OF WATER WELL:			Fraction C					
County: Rice				4 SW 4 3 T 20 S R 9 E W V Street or Rural Address where well is located (if unknown, distance and			R 9 □E W	
2 WELL OWNER: La Business: CHS	First:							
Address: 2000 S Main St					direction from nearest town or intersection): If at owner's address, check here:			
Address: 2000 3. Wi	am ot.				yhawk Pipeline Chase 1 Station, 1/2 mile south of intersection			
City: McPherson	ZIP: 67460	of US Hwy 56 & 10th Road.						
3 LOCATE WELL	4 DEPTH	OF COM	IPLETED WELL:	20 f	t. 5 Latitud	le: 38.3383	2(decimal degrees)	
WITH "X" IN	1		Encountered: 1)	ide: -98.310	046 (decimal degrees)			
SECTION BOX:	2) ft. 3) ft., or 4) \square D				Horizontal Datum: WGS 84 NAD 83 NAD 27			
	WELL'S STATIC WATER LEVEL:NA				Source for Latitude/Longitude:			
	below land surface, measured on (mo-day-yr)				(
NW NE			, measured on (mo-day		(
	Pump test data: Well water was					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:		
W X	ditti	Well water was ft.				Omnie Mapper		
SW SE		hours	s pumping	NA .				
	Estimated Y	ield:	gpm 00		6 Elevation: NA ft. Ground Level TOC			
S Bore Hole Diameter:8.25 in. to 20 ft					Source: ☐ Land Survey ■ GPS ☐ Topographic Map ☐ Other			
1 mile			in. to	ft.		☐ Other		
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID								
1. Domestic: Household			iter Supply: well ID ig: how many wells? .					
☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID					12. Geothermal: how many bores?			
2. ☐ Irrigation 9. Environmental Remediation: well ID					a) Closed Loop Horizontal Vertical			
3. Feedlot	e 🔲 Soil Vapor							
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?								
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other								
Casing diameter 2 in to 20 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 36 in Weight bls./ft. Wall thickness or gauge No. Sch. 40.								
TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Stainless Steel □ 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 .10 ft. to .20 ft., From ft. to ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From 0 ft. to ft., From ft. to ft., From ft. to ft.								
Nearest source of possible contamination: Septic Tank								
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?								
10 FROM TO		ITHOLOG	GIC LOG	FROM	TO L	ITHO. LOG (cont.) or	PLUGGING INTERVALS	
0 20 C	lay	*						
	-				 	Mr	1.000000	
			1 10,042 112			2010-2102		
			er. came.	Notes:	L		A	
11000								
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) 7-7-17								
Kansas Water Well Contractor's License No. 604 This Water Well Record was completed on (mo-day-year)								
under the business name	of FUANCO	meniai Pi	noniy service, inc	S	ignature\	W		
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, Topcka, 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								