		RECORD		WWC-5			sion of Water			**** 11 ***	20160250	
	. 			e in Well Use			irces App. N		T 1: N 1	Well ID	NT 1	
1 LOCATION OF WATER WELL:			Fraction	Section Number			1	Township Numb		nge Number		
County: Stafford 2 WELL OWNER: Last Name:				1/4 SW 1/4 SE			21				2 □ E ■ W	
			-	First:				Address where well is located (if unknown, distance and arest town or intersection): If at owner's address, check here:				
	: Mai Oil C		3.38									
Address: 8411 Preston Road- Ste 800 LB 38 6 3/4 North,								Ηι	ıdson			
City: Dallas State: TX ZIP: 75225												
3 LOCAT		OF COM	PLETED WELL:	100								
WITH '				incountered: 1) ft.			Longitude:(decimal degrees)					
	2) ft., or 4) \(\square \) Dry Well								Datum: ☐ WGS 84			
WELL'S STATIC WATER LEVEL:									Latitude/Longitude			
		below la	nd surface,	measured on (mo-da	y-yr)12-16	5-16			ınit make/model:)	
NW	NE			measured on (mo-day		• • • • • •			WAAS enabled?		No)	
			ata: Well water was ft hours pumping gpm				☐ Land Survey ☐ Topographic Map					
Well				vater was ft.			Online Mapper:					
SW	after	after hours pumping gpr										
	l x	Estimated Yi	Estimated Yield:					6 Elevation:ft. ☐ Ground Level ☐ TOC				
	S	Bore Hole D	Bore Hole Diameter:10 in. to100			. 11. 4114			Land Survey GPS Topographic Map			
1 mile in. to ft. Uther												
7 WELL WATER TO BE USED AS:												
1. Domestic									ld Water Supply: le			
☐ House				11. Test Hole: well ID								
☐ Lawn	n & Garden 7. ☐ Aquifer Recharge: well IDstock 8. ☐ Monitoring: well ID						☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?					
2. Irrigat		9. Environmental Remediation: well ID						a) Closed Loop Horizontal Vertical				
3. ☐ Feedlo								b) Open Loop Surface Discharge Inj. of Water				
	1. ☐ 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 IOINTS: ■ Glued ☐ Clamped ☐ Welded ☐ Threaded												
Casing diameter 5 in to 100 ft., Diameter in to ft. Diameter in to ft.												
Casing height 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 ☐ Mill Slot ☐ Gauzc 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 100 ft. to 20 ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Interv	als: From	ft. to		. ft., From 20	ft. to		ft From .	••••	ft. to	ft.		
Grout Intervals: From												
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage												
☐ 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) None Direction from well? ft.												
10 FROM	TO		THOLOG		FRON				HO. LOG (cont.) or		G INTERVALS	
0		Sandy top so			1101				DOG (cont.) Of	LEGGGIN	CINIDICYALS	
3	25	Hard brown c				+	+					
25	40	Cemented sa		own clav					***************************************	·		
40	65	Fine gravel w										
65	100			ned tight coarse								
		clean		<u> </u>								
					Notes	:	·					
11 CONT	RACTOR	S OR LANDO	WNER'S	CERTIFICATIO	N: This v	vater	well was	co	nstructed, 🗌 reco	nstructed,	or plugged	
under my jurisdiction and was completed on (mo-day-year)12-15-16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No134 This Water Well Record was completed on (mo-day-year)12-23-16												
Kansas Wa	ater Well Co	ntractor's Lice	nse No		ater Well	Keco	ord was com	ple	ted on (mo-day-ye	ear)12-	∠3÷.l.0	
under the b	Jusiness nan	ong with a fee of [©]	5 00 for eac	Bemis Ent Inc	ansas Depart	SIGI	of Health and F	nvir	onment Rureau of We	ater GWTS	Section	
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												