		RECORD	Form '	WWC-5	D	ivision of Water				
		Correction		e in Well Use		sources App. No		Well ID		
1 LOCATION OF WATER WELL: Fraction					ection Number	1				
County: Reno SW ¼ NW ¼ NW ⅓						35	T 24 S	R 10 □E ■		
						Street or Rural Address where well is located (if unknown, distance and				
Business: Address: 8516 S. Netherland Rd.						direction from nearest town or intersection): If at owner's address, check here:				
Address:						Hwy 50 west to Netherland Rd. 3S 1/2E SSR				
City: Sylvia State: Ks. ZIP: 67581										
3 LOCAT		4 DEPTH	LOF COM	APLETED WELL:	70	ft 5 Latitue	1e. 37.9249	9(decimal de	anreac)	
	WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1)					t. Longitude: 098.38940 (decimal degrees)				
N 2) ft. 3) ft., or					☐ Dry Well			4 □ NAD 83 ■ NA		
WELL'S STATIC WATER LEVEL: ■ below land surface, measured on (mo-					Source for Latitude/Longitude:					
							GPS (unit make/model:Garmin 62S)			
NWNE - above land surfac							(WAAS enabled? ☐ Yes ■ No) ☐ Land Survey ■ Topographic Map			
w						Online Mapper:				
SW	Well water was									
anterno				s pumping gpm			on: 1730 A	■ Ground Lovel □	TOC	
S Bore Hole			ted Yield:gpm ole Diameter: .9.7/8 in. to70			Source:	6 Elevation: 1730ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map			
1	mile	Boie Hole i	in. to							
7 WELL WATER TO BE USED AS:										
1. Domestic				ter Supply: well ID	•••••	10. □ Oil	Field Water Supply: 16	ease		
1	☐ Household 6. ☐ Dewatering: how many wells?									
1	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID									
	■ Livestock 8. ☐ Monitoring: well ID						rmal: how many bore			
2. ☐ Irrigat 3. ☐ Feedlo				al Remediation: well						
4. Indust			Air Sparge Recovery		Extraction	b) Ope	n Loop L Surface Di	scharge Inj. of Wa	ater	
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:										
8 TYPE OF CASING USED: Distract Distrac										
Casing diameter										
Casing diameter 5. in. to 50 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 18. in. Weight 160 lbs./ft. Wall thickness or gauge No. 214.										
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)										
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)										
SCREEN-PERFORATED INTERVALS: From .50										
GRAVEL PACK INTERVALS: From 70 ft. to 20 ft., From ft. to ft., From ft. to ft.										
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other										
Grout Intervals: From										
Nearest sou	irce of possib	de contaminati	on:			,				
☐ 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 ☐ Feedvard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) .Open.field										
Direction fro	Direction from well?									
10 FROM	TO	I	JTHOLOG	GIC LOG	FROM			PLUGGING INTERV	VALS	
0	5	Top soil								
5		Clay & fine s								
20		Clay w/strks								
32		Fine sand w								
55	70	Fine sand w	strks of g	ravel						
Notes:										
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) .4/19/2019 and this record is true to the best of my knowledge and belief										
Kansas Wa	iter Well Co	ntractor's Lice	ense No1	34 This W	ater Well Re	cord was come	oleted on (mo-day-ve	ear) 4/22/2019		
under the b	usiness nam	e of Koseno	rantz-Ber	nıs.Ent		ignature	Bumell			
Mail	I white copy al	ong with a fee of	\$5.00 for <u>eac</u>	h constructed well to: Ka	ınsas Departmer	it of Health and Er	vironment, Bureau of W	ater, GWTS Section,		
Vigit ne at bete	J SW Jackson S	st., Suite 420, Tor s.gov/waterwell/i	eka, Kansas (55512-1367. Mail one to	Water Well Ov KSA 82a-1		for your records. Teleph	one 785-296-5524. Revised 7/10/201 :	_	
C	V.II TI VY VY. KUHCK	B.SUM WAILI WEI!/	HUCA.HUHI		130A 02a-1	-1-		ACVISCU //10/201	J	