WATER WELL R		Form V	VWC-5		ision of Water				
Original Record	Correction Change in Well Use			Resources App. No.			Well ID		
1 LOCATION OF WATER WELL: Fraction County: Reno 4 4 4 4				Sec Sec	Section Number   Township Number   Range Number   T 25 S   R 9				
2 WELL OWNER: L	or Nome: 5/	1 - 1 - 1 - 1	74 74 C						
Business:	ist Maille.	Tilbi: GASY		ect or Rural Address where well is located (if unknown, distance and ction from nearest town or intersection): If at owner's address, check here:					
Address: 1199 Ju	160 AU		Langdon	angdon North To Arlington Rd.					
Address: City: Cunning!	AM	State: K5	ZIP: 67035	Then	msy 5/8	Mile & SE	70 C	entere of y	
3 LOCATE WELL									
WITH "X" IN	Depth(e) Gr	OF COM	ncountered: 1)	r.	•	X		` * '	
SECTION BOX:			) ft., or 4)		Longitude:				
· · · · · · · · · · · · · · · · · · ·	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:				
	below land surface, measured on (mo-day-yr).  Above land surface, measured on (mo-day-yr).								
NW	Pump test d	and surface, ata: Well wa	iter was	ft.	(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
w E		hours	pumping	gpm		Online Mapper:			
swse	Well water was ft.								
	after hours pumping				6 Elevation:ft. Ground Level TOC				
S	Bore Hole I	Diameter: 🏒	gpm 25. in. to75	ft. and	Source:    Land Survey    GPS    Topographic Map				
mile		••••	in. to	ft.		Other			
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
Household     Household	5. Public Water Supply: well ID				10. Oil Field Water Supply: lease				
☐ Lawn & Garden	7.	Aquifer Re	charge: well ID						
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?				
Z. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID  ☐ Air Sparge ☐ Soil Vapor Extrac				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. Industrial		Recovery		LAUACHON		r (specify):			
Was a chemical/bacteriological sample submitted to KDHE?   Yes No If yes, date sample was submitted:									
Water well disinfected? No									
8 TYPE OF CASING USED: Steel MPVC Other CASING JOINTS: MGlued Clamped Welded Threaded									
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									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
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)       □ Distance from well?       □ Oil Well/Gas Well									
Direction from well?	277	·····	Distance from	well? 27	<u> </u>		•		
10 FROM TO	]	LITHOLOG	IC LOG	FROM	TO L	THO. LOG (cont.) or	PLUGGIN	IG INTERVALS	
0 5			TOP Soil						
5 25		The San	nd			<del></del>			
35 60	Fine	ClAy TAN SI	4.1						
35 60	med.		ME Rocks						
65 80	med.		ME SAND M	1.X					
80 95	Red			Notes:					
11 CONTRACTOR	OD T ASTE	OWNER	OPPOTETAL ATT	No This work	a suall sum a Ra	constructed Tree	onetmicted	or I phigged	
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No. Signature Signatu									
Kansas Water Well Con	tractor's Lic	ense No	672 This V	Vater Well Re	cord was comp	leted on (mo-day-y	ear) .7	7217	
under the business name	of .Color	wedis	water uci	1. SURS	gnature	The first	7///	Section	
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and French Barrantos Water, CWTS 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									