WATER WELL		1 WWC-5		sion of Water				
	Correction Cha			urces App. No.		Well ID		
1 LOCATION OF V		Fraction SW1/4 NE1/4 NW1/4	1	tion Number	Township Numb		e Number	
County: SEDGW			29 T 26 S R 1 E W					
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:								
100000000000000000000000000000000000000								
Address: 4065 N WOODLAWN CT STE 3 Address: Address: Oite: DELAIDE State: KS 7IP: 67220 MAIZE, KS 67101								
City: BEL AIR	E State: K	S ZIP: 67220	MAIZE, NO	5/ 101				
3 LOCATE WELL	A DEPTH OF CO	OMPLETED WELL:	60 A	5 Lotitude	٠.	(4	animal danman	
WITH "X" IN		er Encountered: 1)		Longitude:				
SECTION BOX:	2) ft.		Horizonte	al Datum: WGS 8	4 NAD 8	R I NAD 27		
N	WELL'S STATIC WATER LEVEL: 20 ft.				r Latitude/Longitude		J L IVAD ZI	
	below land surface, measured on (mo-day-yr).12/15/2				(unit make/model:)	
NW NE	above land surface, measured on (mo-day-yr)				(WAAS enabled?)	
	Pump test data: Wel		☐ Land Survey ☐ Topographic Map					
W		after hours pumping						
SW SE	after hours pumping							
	Estimated Vield		6 Elevation:ft. Ground Level TOC					
S	S Bore Hole Diameter:10.5 in. to00 ft. and				Source: Land Survey GPS Topographic Map			
mile		in. to		L	Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:		Water Supply: well ID			eld Water Supply: le			
Household 6. Dewatering: how many wells?				11. Test Hole: well ID				
Lawn & Garden 7. ☐ Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?				
2. Irrigation 9. Environmental Remediation: well ID				a) Closed Loop Horizontal Vertical				
3. Feedlot Air Sparge Soil Vapor Extraction				b) Open Loop Surface Discharge Inj. of Water				
4. Industrial	☐ Recove				(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 JOINTS: ■ Glued ☐ Clamped ☐ Welded ☐ Threaded								
Casing diameter								
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 5 in to 60 ft., Diameter in to ft., Diameter in to 5. In Weight Boyle land surface 12 in Weight Wall thickness or gauge No. SDR-26.								
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)								
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From .40 ft. to .60 ft., From ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other								
Nearest source of possible contamination:								
☐ 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) Direction from well? EAST Distance from well? 100+								
Direction from well?	NST	Distance from w	ell? 100+		ft.			
10 FROM TO	LITHOL	OGIC LOG	FROM		THO. LOG (cont.) or		INTERVALS	
	TOP SOIL							
1 13	CLAY							
13 20	FINE SAND				V-1			
20 40	MED GRAVEL							
40 60	MED SAND							
	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) .12/15/20.16 and this record is true to the best of my knowledge and belief. This Weter Well Record was completed.								
Kansas Water Well Contractor's License No. 884 This Water Well Record was completed in (mo-day ar) 12/20/2016 under the business name of WENINGER DRILLING, LLC Signature								
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.kdhcks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015								