		RECORD		WWC-5			ivision of W						
Origin	Original Record Correction Change in Well Use I LOCATION OF WATER WELL: Fraction						Resources App. No. Section Number Resources App. No. Section Number Resources App. No. Resources App. Resources App. Resources App. No. Resources App. No. Res			hip Numb	Well ID	ge Number	
Coun	tv:	ware		1120113	ENNE	NW/	27	loci		27s	R	<i>~</i> ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
2 WELL OWNER: Las Name: P First: Street or Rural Address where well is located (if unknown, distance an													
Business: Address: Ad												check here: 🔲	
Address: Wickets State: No ZIP: 67204 5013 Sund Key Ct												Manage -	
City:	Wases	its.	State:) ZIP: 🥴	1204	7 6 1 2000 10 10 10 10 10 10 10 10 10 10 10 10			7 /	2			
3 LOCAT		4 DEPTI	HOF COM	(PLETED	WELL:	3/	ft. 5 Lat	itude				(decimal degrees)	
3 LOCATE WELL WITH "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: i).												(decimal degrees)	
N 2) tt. 3) it., or 4) L.L.							LDry Well Jatum: TWGS 84 TINAD 83 TINAD 27						
WELL'S STATIC WATER LEVEL: . J below land surface, measured on (mo-day-y							5-1/2/6 burce for Latitude/Longitude:						
, x	above land surface, measured on (mo-day-							☐ GPS (unit make/model:) (WAAS cnabled? ☐ Yes ☐ No)					
[4.4]	1		Pump test data: Well water was				Land Survey Topographic Map					u)	
W	+++E	after	after hours pumping				gpm						
sw	SE			-			en and receive the						
	111	Estimated V	after hours pumping				6 Elevation:					Level TOC	
1,	S	Bore Hole	Bore Hole Diameter:					rce: 🗌	Land Su	rvey 🔲 🤇	GPS 🔲 To	pographic Map	
	mile			in. !	lo ,	ft.			Other	.,		***************	
7 WELL WATER TO BE USED AS:													
1. Domestic: 5. Public Water Supply: well ID													
	☐ Household 6. ☐ Dewatering: how many wells? Lawn & Garden 7. ☐ Aquifer Recharge: well ID												
Livest	tock						?						
	2. 🗌 Irrigation 9. Environmental Remediation: well 1D.							Closed	Loop [] Horizont	al 🗌 Vertic	cal	
	3.							b) Open Loop Surface Discharge Inj. of Water					
4. Industrial Recovery Injection 13. Other (specify):													
Was a chemical/bacteriological sample submitted to KDHE? Yes You If yes, date sample was submitted:													
Water well disinfected? Yes Man CASING IOINTS: Man Classed													
8 TYPE OF CASING USED: Steel MPVC Other													
Casing height above land surface													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
☐ Steel		inless Steel	☐ Fiberg	.	PVC	sed (open hol		other (S	specify)				
☐ Brass		vanized Steel RATION OPE	Conci		☐ None a	seu (open no	ie)						
	nuous Slot	Mill Slot			ed [] To	rch Cut 🔲 I	Drilled Hole	s 🗆 (Other (Sp	ecify)	· · · · · · · · · · · · · · · · · · ·	*******	
☐ Louve	ered Shutter	Key Punci	hed 🔲 Wi	ire Wrapped	I 🔲 Sav	v Cut 🗀 🛚	None (Open	Hole)			•		
		ED INTERV											
		CK-INTERV											
Grout Intern	r MATERI.	AL: Neat o	cement [Cement gro	out LEBei	ntonite 📋	Other					• • • • • • • • • • • • • • • • • • • •	
		le contaminati		. 11., rioni		L 10	II., F (OF	11	H	. 10	H.		
☐ Septic	•		Lateral Lines		Pit Privy		Livestock F	ens	1	_ Insectic	ide Storage		
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lag													
	ight Sewer Li (Specify)	nes 📋 S	Seenage Pil	LI.	Feedyard	ليا	Fertilizer S	torage	ı	∐ Oil Wel	I/Gas Well		
Direction from		mort	\$	Distar	ice from we	11?	40			ft.			
10 FROM	то	I	ATHOLOG		2	FROM	TO				PLUGGING	INTERVALS	
Q	3	Tox	2 5	mel		2	,						
3_	1.5		Ein	φz	220	and	<u> </u>						
15	.3/	Con	noc	ta	$2j-\xi$	aser	<u> </u>	 					
and the second s						 							
nertical garage from the control of		Manager and the supplement of										The state of the s	
		***************************************				Notes:	<u> </u>	A.,					
						<u> </u>							
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)													
under the b	usiness nam	e of	and o	2	J. 1113 17 41	4	i al	12	accessors.		,	*********	
INSTRUC	TIONS: Send o	ne copy to WATER ealth and Environme	WELL OWNE	R and retain on	c copy for your	records. Submi	t fee of \$5.00 fo Suite 420, Tope	or each co ka, Kansa	mstructed w as 66612-13	rell along with 167. Telephor	one (white) cop te (785) 296-356	ny to Kansas 55.	

Visit us at http://www.kdbcks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012