| | WELL B | | _ | WWC-5 | | | ion of Water | ļ | | | | | |
|--|--|---------------|--------------------------------|-------------------------|--|------------------|--|----------------------|--------------|-------|---------------|----------------|--|
| | | | | | | | rces App. No. | | ☐ Well II | | | | |
| 1 LOCATION OF WATER WELL: | | | Fraction | , | | | Township Nun | | | e Nun | | | |
| | : SEWARI | | | | V 1/4 NW 1/4 21 T 34 S R 32 Street or Rural Address where well is located (if unknown, distant | | | | | | | | |
| | | ast Name: RIC | S | First: ABRAM | | | | | | | | | |
| Business: Address: | | BBASKA | | | direction from nearest town or intersection): If at owner's address, che | | | | | | eck ne | re: | |
| Address: | 020 N NE | DIVAGIVA | | | AT O RD AND SOUTH ARK LANE | | | | | | | | |
| City: | LIBERAL | | State: KS | ZIP: 67901 | | | | | | | | | |
| 3 LOCAT | E WELL | 4 DEDTI | I OF COM | IPLETED WELL: | 302 | A | F I adda.d | | | | | | |
| WITH " | X" IN | | | Encountered: 1) | | It. | 5 Latitude:(decimal degrees) Longitude:(decimal degrees) | | | | | | |
| 1 | N BOX: | | | 3) ft., or 4) [| | 11 | Longitt | tal Datum: WGS | 94 D NA | (de | | degrees) | |
| 1 | V | WELL'S S | WELL'S STATIC WATER LEVEL: 210 | | | | | or Latitude/Longitue | | D 63 | | NAD ZI | |
| | | ☐ below | land surface | , measured on (mo-day | -yr) | | | (unit make/model: | | | | | |
| | | | | , measured on (mo-day | | | (WAAS enabled? ☐ Yes ☐ No) | | | | | | |
| | | | | vater was | | | ☐ Land Survey ☐ Topographic Map | | | | | | |
| | | | | s pumpingvater was | | | Online Mapper: | | | | | | |
| | | | | s pumping | | | | | | | | | |
| 1 1 anterior | | | Yield: 50gpm | | | | 6 Elevation:ft. ☐ Ground Level ☐ 7 | | | | | | |
| S Bore Hole Diameter | | | Diameter: | 9.7/8 in. to | ft. and | | Source: Land Survey GPS Topograp | | | | | | |
| 1 r | nile | | | in. to | | | | ☐ Other | | | | | |
| 7 WELL | WATER TO | D BE USED | | | | | | | | | | | |
| 1. Domestic | : | | | nter Supply: well ID | | | | Field Water Supply: | | | | | |
| | | | | g: how many wells? | | 11. Test Ho | | | •• | | | | |
| | | | | echarge: well ID | | | | d Uncased [| | | | | |
| Livesto | g: well ID | | | | mal: how many bo | | | | | | | | |
| 2. ☐ Irrigati 3. ☐ Feedlo | al Remediation: well I e □ Soil Vapor | | | | ed Loop | | | | Water | | | | |
| 4. Industr | | | ☐ Air Sparge ☐ Recovery | _ | | | | | | | | | |
| | | | | | V | . T - | | | | | | | |
| 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 diam | ht above land | III. 10 | 12 in | n. Weight | lhs | / f f | Wall thickne | ess or gauge No. SI | OR 21 | 11. | | | |
| | | | | | | , 144 | Wall tillolar | or gauge mon mi | | •• | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Steel □ Fiberglass ■ PVC □ Other (Specify) | | | | | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) | | | | | | | | | | | | | |
| SCREEN C | OR PERFOR | RATION OPI | ENINGS A | RE: | | | | | | | | | |
| ☐ Continuous Slot ■ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | | | | | | | | |
| Louve | red Shutter | ☐ Key Punc | ched W | /ire Wrapped ☐ Sa | aw Cut | ☐ No | one (Open Hol | e) | | | | | |
| | | | | n .262 ft. to .302 | | | | | | to | | ft. | |
| | | | | n 25 ft. to 302 | | | | | | | | | |
| 9 GROUT | MATERIA | AL: Neat | cement [| Cement grout B | entonite | ☐ Otl | her | | | ••••• | • • • • • • • | · - • • | |
| | | | | ft., From | . It. to | • • • • • • • • | It., From | It. to | ft. | | | | |
| Nearest sou | | le contaminat | n on: Lateral Line | es 🔲 Pit Privy | | Пτ | ivestock Pens | □ Insec | ticide Stora | 100 | | | |
| Sewer | | | Cess Pool | Sewage La | agoon | | uel Storage | | doned Wat | | ell | | |
| □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well | | | | | | | | | | | | | |
| Other (Specify) Direction from well? NEW HOME SITE Distance from well? | | | | | | | | | | | | | |
| Direction fro | om well?NE | W HOME | SITE | Distance from w | | | | | | | | | |
| 10 FROM | TO | | LITHOLO | GIC LOG | FROM | И | TO L | ITHO. LOG (cont.) | or PLUGG | ING | INTE | RVALS | |
| 0 | | SAND | | | | | | | | | | | |
| 3 | | RED CLAY | | | | \rightarrow | | | | | | | |
| 10 | | SANDY CL | | ALICHE | | | | | | | | | |
| 55 | | SANDY CL | | | | \perp | | | | | | | |
| 110 | | SAND WITI | | | | | | | | | | | |
| 265 | 307 | CLAY WITH | I SAND S | TREAKS | | | | | | | | | |
| | | | | | Notes | : | | | | | | | |
| | | | | | _ | | | | | | | | |
| 44 4.4 | | | A11/4/ | | | | | | | | | , | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, plugged | | | | | | | | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) .9/.14/.16 | | | | | | | | | | | | | |
| under the business name of SOUTHWEST WINDMILL Signature | | | | | | | | | | | | | |
| Mail | 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, | | | | | | | | | | | | |
| | | | | 66612-1367. Mail one to | | | | | | | | | |
| Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised | | | | | | | | | | | | 015 | |