WATER WELI		WWC-5		sion of Water		MW-10		
Original Record Correction Change in Well Use			Resources App. No.		Township Numb	Well ID		
		Fraction NW ¼ NW ¼ NW ¼		tion Number 32	er Range Number R 33 □ E ■ W			
2 WELL OWNER: Last Name: First: Street or Rural Address where								
Business: Guru				rection from nearest town or intersection): If at owner's address, check here:				
Address: 1408	I. Western Ave			t "1411" N. Western Ave				
Address:	State: KS	1	about 1411	14. 4403(0111	7.00			
2 LOCATE WELL								
WITH "V" IN 4 DEPTH OF COMPLETED WELL:								
SECTION ROX. Depth(s) Groundwater Encountered: 1)!!!				Longitude: 100.93984 (decimal degrees)				
N	2) ft. 3) ft., or 4) \(\sqrt{1}\) \(\text{VELL'S STATIC WATER LEVEL:} \) \(\text{9/6/18} \)				Horizontal Datum: WGS 84 NAD 83 NAD 27			
X				Source for Latitude/Longitude: GPS (unit make/model:Epoch)				
	above land surface, measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ■ No)				
Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W E after hours pumpinggpt				Online Mapper:				
Well water was ft.								
	Estimated Yield:	gnm		6 Elevation: 2859.10ft. ☐ Ground Level ■ TOC				
S	Bore Hole Diameter:	8.5 in to 197	ft. and	Source: Land Survey GPS Topographic Map				
1 mile in. to ft.				☐ Other				
7 WELL WATER TO BE USED AS:								
1. Domestic:	5. 🗌 Public W	ater Supply: well ID				ease		
☐ Household								
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID				Cased Uncased Geotechnical			
☐ Livestock 8. ■ Monitoring: well ID								
2. ☐ Irrigation 9. Environmental Remediation: well ID. 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex								
4. Industrial	☐ Recovery		Extraction					
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 diameter								
Casing height above land surface								
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 .155 ft. to .195 ft., From ft. to ft. to ft.								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other								
Grout Intervals: From 0.5 ft. to 151 ft., From ft. to ft., From ft. to ft.								
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?								
10 FROM TO		OGIC LOG	FROM	TO L	THO. LOG (cont.) o	or PLUGGING INTERVALS		
0 0.5 0.5 18	Grass	cond	 					
0.5 18 18 46	Silty Clay with trace							
46 62	Sand with sandy clar Clay and caliche with			-				
62 73	Sand and sandy clay		 					
73 128								
128 133		Clay and caliche w/ sandy clay and sand Gravelly sand with clay and caliche Notes: Expr				e: U1-088-14879		
128 133 Gravelly sand with clay and caliche 133 Caliche & clay with sandy clay Notes: Express Lane #22; KDHE Project Code: U1-088-14879								
185 197 Gravelly sand with clay and caliche								
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) .8/31/18								
Kansas Water Wel	Contractor's License No.	.09.1 This Wand Well	ater Well Re	cord was comp	neted on (mo-day-)	/ear) .14/1.0(.10		
Mail 1 white co	name of Woofter Pump	each constructed well to: Ka	nsas Departmen	t of Health and Fr	vironment. Bureau of V	Vater, GWTS Section.		
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.								
	dheks.gov/waterwell/index.html		KSA 82a-12			Revised 7/10/2015		

