			rm WWC-5				on of Water					
		Correction C	Change in Well Us	se			es App. No.		Well ID			
	nty: REPU	WATER WELL:	Fraction	LIZ CINZ		Sectio	n Number	Township Numl		nge Number		
		R: Last Name: NELSON	SW ¼ SW			D 1	27	T 4 S	R 2	E W		
Busine		Last Name: INELSON	First: COF	KEY	Street or	treet or Rural Address where well is located (if unknown, distance and						
	Business: Address: 2252 YOUNG ROAD direction from nearest town or intersection): If at owner's address, check here:											
Addres	Address:											
City:	CLYDE	State:	KS ZIP: 669;	38								
	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:69							ft. 5 Latitude: 39.668560 (decimal degrees)				
	WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1)							Longitude: -97.526695 (decimal degrees)				
SECT	2) ft. 3) ft., or 4)											
	WELL'S STATIC WATER LEVEL:30						Source for	or Latitude/Longitude	+ Se NAD	83 🗀 NAD 2.		
	below land surface, measured on (mo-day-yr).						GPS (unit make/model GARMIN					
NW	above land surface, measured on (mo-day-yr)					(WAAS applied? T Vos T No.)						
	Pump test data: Well water was38ft. after5 hours pumping 13					☐ Land Survey ☐ Topographic Map						
W	E after9 hours pumping !9 gpm						☐ Onli	ne Mapper:	·····			
SW	SW SE Well water was											
	1	Estimated Yield:	Estimated Yield:gpm			6 Elevation: 1410 ft. Ground Level TOC						
	S	Bore Hole Diamete	ore Hole Diameter: 10 in. to 69 ft.			and Source: Land Survey GPS Top			pographic Man			
	mile in. to							Other		pograpme map		
7 WELL WATER TO BE USED AS:												
1. Domest	ic:	5. 🗌 Public	Water Supply: v	vell ID			10. □ Oil Fi	eld Water Supply: le	ase			
	Household 6. ☐ Dewatering: how many wells?											
7111111	Lawn & Garden 7. Aquifer Recharge: well ID											
	Livestock 8. Monitoring: well ID					1	Geothern	nal: how many bores	?			
	☐ Irrigation 9. Environmental Remediation: well ID						a) Close	d Loop 🔲 Horizont	al 🗌 Vertic	cal		
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex 4. ☐ Industrial ☐ Recovery ☐ Injection											
15. [] Outer (openly).												
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 in. to												
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-	PERFORA'	ΓΕD INTERVALS: F	rom 29 ft i	to 69	ft From	n	ft to	e Erom	ft to	ft.		
C	RAVEL PA	ACK INTERVALS: F	rom 28 ft.	to 69	ft Fron	n	ft. to	ft From	ft to			
y GROU	I MATERI	AL: Neat cement	Cement grout	t 🔳 Ber	ntonite [Other						
Grout Inter	vals: From .	tt. to<	ft., From	f	t. to	ft	From	ft. to	ft.			
Nearest sou	irce of possi	ble contamination:					,					
☐ Septic		☐ Lateral L	_	t Privy			stock Pens	☐ Insectici				
Sewer		☐ Cess Poo	_	wage Lag	-		Storage		ned Water W	'ell		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well												
☐ Other (Specify) Direction from well? DOWNHILL Distance from well? 100 ft.												
10 FROM	TO	LITHOL	OGIC LOG	I HOIII WE	FROM				Lucchic	B. Important o		
0	2	TOP SOIL	OGIC LOG		TROM	1	. LII	HO. LOG (cont.) or I	LUGGING	INTERVALS		
2	17	TAN CLAY				+						
17	18	LIMESTONE LAYE	R									
18	24	TAN CLAY				-						
24	41	LIGHT GRAY CLAY	,									
41	67	SANDSTONE				_						
67	69	GRAY CLAY			Notes.	CASE) AT 60 ET					
OS OIMI CLAI						Notes: CASED AT 69 FT.						
					8							
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) 03/2//2018 and this record is true to the bast of my knowledge and belief												
Kansas Water Well Contractor's License No. 499. This Water Well Record was completed by mo-dal Alear 463/04/2018												
under the business name of Williams Utiling Co., Inc.												
Mail I 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	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	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015											