			m WWC-5		vision of Water	30,051	11/11/15			
			hange in Well Use Fraction		ources App. No.	Toumship Numb	Well ID	as Number		
1 LOCATION OF WATER WELL: Fraction County: Ottawa					24	Township Numb		ge Number □ E ■ W		
2 WELL OWNER: Last Name: Ablard First: Charles Street or Rural Address where well is located (if unknown, distance										
Business: Charles D. Ablard Trust direction from nearest town or intersection): If at owner's address, check here:										
Address: Address: 803 Hall PL From Minniapolis, Ks. 8N on old Hwy 81 to Treaty Re								d.		
1						W corner of intersection				
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:										
	Denth(s) Groundwater Engountered: 1)									
SECTION BOX: 2)					Dry Well Horizontal Datum: WGS 84 NAD 83 NAD 27					
'		WELL'S STATIC	WELL'S STATIC WATER LEVEL: 78			r Latitude/Longitude		35 Ca 1171D 27		
		below land sur	below land surface, measured on (mo-day-yr).10/2							
NW	NE		above land surface, measured on (mo-day-yr)			(
			nours pumping			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
SW SE			ell water was							
SW	SE		after hours pumping gpm			6 Elevation:ft. Ground Level TOC				
		Estimated Yield:	Estimated Yield:gpm Bore Hole Diameter:28 in. to240 ft.			Source: Land Survey GPS Topographic Map				
11	S milel	Bore Hole Diamete	r:49 in. to in. to			Other				
7 WELL WATER TO BE USED AS:										
1. Domestic			c Water Supply: well ID		10. 🔲 Oil Fi	eld Water Supply: 10	ease			
_	☐ Household 6. ☐ Dewatering: how many wells?				11. Test Hole: well ID					
· =	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical					
_	☐ Livestock 2. ☐ Irrigation 8. ☐ Monitoring: well ID					12. Geothermal: how many bores?				
	3. Feedlot Air Sparge Soil Vapor Ex					b) Open Loop Surface Discharge Inj. of Water				
4. Indust		☐ Recov				13. Other (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 diameter 16 in. to 160 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in. Weight SCH40 lbs/ft. Wall thickness or gauge No. 500										
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)										
☐ Steel ☐ 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: From160										
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										
Direction from well?										
10 FROM	ТО	LITHO	LOGIC LOG	FROM		THO. LOG (cont.) or		GINTERVALS		
0	8	Top soil and clay								
8		Sand-rock, soft								
90		Shale w/streaks of	f pyrite							
142		Hard gray rock								
144		Shale w/streaks of	f pyrite			······································		**************************************		
160		Hard pyrite	atalog af comit o	NT 4-	L					
165		Sandstone-soft w/	strks of pyrite	Notes:						
200 240 Sand-rock, soft 240 243 Red and gray shale										
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) .10/20										
Kansas Wa	ter Well Co	ntractor's License N	o. 2016 This Wa	ater Well Rec	cord was compl	ted on mo-day-y	ear) .10/3.17	/20.16		
under the b	usiness nam	ong with a fee of \$5.00 fo	PE((US.E/II.	Si	gnature	A December 1	leter Curre e			
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.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										