well # 3

WATER WELL RECORD	Form WWC-5		sion of Water	3		
Original Record Correction 1 LOCATION OF WATER WE	Change in Well Use LL: Fraction		irces App. No. ion Number	Torpa 1: NT 1	Well ID	
County: Class	NE1/48E1/48U/1/4		4 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Township Number		
2 WELL OWNER: Last Name:	lordboc First: Mike	Street or Rura	ıl Address wh	ere well is located	R 3 DE W (if unknown, distance and	
Business: Address: 1008 B. WIST MIGNOLIA RL. direction from nearest fown or intersection). If at owner's address check here: Address: Address: 1008 B. WIST MIGNOLIA RL. How WIRFALL B. WISO on 82 Hours to Safe Rd.						
Address. Of A State of the Assault of Assaul						
3 LOCATE WELL A DEPOS		to the property of the second section of the section o	· ,,,,, · · · ·		FAST	
WITH "X" IN 4 DEPTI	H OF COMPLETED WELL:	1,40 ft.	5 Latitude		(decimal degrees)	
DECITOI DOM.	SECTION BOX: Depth(s) Groundwater Encountered: 1) 9 ft. 2) ft., or 4) \square Dry Well			Longitude:		
WELL'S S	WELL'S STATIC WATER LEVEL:			r <u>Latitude/Longitude:</u>	103 NAD 21	
below	below land surface, measured on (mo-day-yr)		GPS (unit make/model:)			
Pump test	Pump test data: Well water was ft.			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map		
W E after				Online Mapper:		
after	328 augl					
1	Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6 Elevation:ft. Ground Level TOC			
S Bore Hole	2 Diameter, Mily 1 III. to 1 It. and		Source:			
7 WELL WATER TO BE USED AS:						
1. Domestic: 5. [Public Water Supply: well ID	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10. ☐ Oil Fi	eld Water Supply: lea	ase	
☐ Household 6. ☐ Dewatering: how many wells?			11. Test Hole: well ID			
Livestock 8. Monitoring: well ID						
2. ☐ Trrigation						
- 1	☐ Air Sparge ☐ Soil Vapor I☐ Recovery ☐ Injection	extraction			charge	
Was a chemical/bacteriological sample submitted to KDHE? Yes Poo If yes, date sample was submitted:						
Water well disinfected? Wes No						
8 TYPE OF CASING USED: Steel PVC Other						
Casing height above land surface						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)						
SCREEN OR PERFORATION OPENINGS ARE:						
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)						
Louvered Shutter						
GRAVEL PACK INTERVALS: From ft.,						
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other						
Grout Intervals: From						
☐ Septic Tank ☐	Lateral Lines Pit Trivy	V 1773	ivestock Pens	☐ Insectici		
	Cess Pool Sewage Lag Seepage Pit Feedyard		uel Storage ertilizer Storage		ned Water Well	
Other (Specify)						
Direction from well?						
O I TOO Sale	LITHOLOGIC LOG	FROM	TO LIT	HO. LOG (cont.) or	PLUGGING INTERVALS	
1 6 Cours	Chole				- immercial in the second in t	
6 50 Brown	Short					
50 Ss Linest	Ex- State			· · · · · · · · · · · · · · · · · · ·	- THE MANAGES AND ADDRESS OF THE STREET	
62 91 Prouse	Shall (·····i		
91 108 Lanist	on, wasa,	Notes:			· · · · · · · · · · · · · · · · · · ·	
198 114 brown Shill						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was IV constructed reconstructed on the constructed of the cons						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was It constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day year) and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No						
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for younged rds. Submit fee of \$5.00 for each constructed yell along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.						
Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012						