WATER WELL R		WWC-5		vision of Water		1637-02	
Original Record		ge in Well Use		ources App. No.		Well ID	
1 LOCATION OF W.	ATER WELL:	Fraction		ction Number	Township Numb		
County: Riley		NE14 NW 14 SE 14		13	T 11 S	R 6 ■E□W	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and							
Business: US Army DPW Environmental Division   direction from nearest town or intersection): If at owner's address, check here:							
Address: 404 Pershing Court							
Address:							
City: Fort Rilev	State: KS	ZIP: 66442	and L 5	treet.			
3 LOCATE WELL WITH "V" IN 4 DEPTH OF COMPLETED WELL:35 ft. 5 Latitude: 39.098263 (decimal degrees)							
WITH "X" IN	Denth(s) Groundwister	Engage to well. 20		. 5 Lamua	-06 710	OA1	
SECTION BOX:	Depth(s) Groundwater Encountered: 1)20.0 ft. 2)						
N	WELL'S STATIC WATER LEVEL: ft. Source for Latitude/Longitude:						
	□ below land surface, measured on (mo-day-yr)						
	above land surface	• /					
NW NE	Pump test data: Well w	†		(WAAS enabled? ☐ Yes ☐ No) ■ Land Survey ☐ Topographic Map			
W E				Online Mapper:			
1 1 1 1 1 1	after hours pumping gpm  Well water was ft.						
SW SE	- L.						
	Estimated Yield:gnm				6 Elevation: NA		
S	Bore Hole Diameter:	ft. and	Source: Land Survey GPS Topographic Map				
1 mile	in. to ft						
7 WELL WATER TO BE USED AS:							
1. Domestic:		ater Supply: well ID		10 LJ OH E	ield Water Sunnly 14	ease	
☐ Household		ng: how many wells?			e: well ID		
☐ Lawn & Garden	7 \ Aquifer R	echarge: well ID	***************************************		☐ Cased ☐ Uncased ☐ Geotechnical		
Livestock	7. ☐ Aquifer Recharge: well ID						
2. Irrigation	9. Environmental Remediation: well ID				d Loop  Horizon		
3. ☐ Feedlot		e Soil Vapor I		b) Open Loop  Surface Discharge  Inj. of Water			
4. Industrial	☐ Recovery						
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 JOINTS: Glued Clamped Welded Threaded							
Casing diameter							
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other							
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 .20 ft. to .35 ft., From ft. to ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From							
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							
Other (Specify) POL Sites							
Direction from well?		Distance from we	:11?		ft.		
10 FROM TO	LITHOLOG		FROM			PLUGGING INTERVALS	
0 6 0	lay, dark gray, stiff	······································	1			- The state of the	
	ilt, brown, damp	· · · · · · · · · · · · · · · · · · ·		<del>  </del>			
	and, brown, fine grai	n damn	1	<del></del>			
<u> </u>	and, brown, medium		+				
			<del>                                     </del>	<del>  -</del>			
10 33 3	and, brown, coarse o	rain, moist to wet	<del></del>				
			<del> </del>	LL			
	Notes:						
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) .11-14-20.19 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No. 604 This Water Well Record was completed on (mo-day-year)							
under the business name	of ⊨nvironmental Pi	riority Service, Inc	Si	gnature	M 11 11 1		
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							

