WATER WELL RECORD Form WWC-5				sion of Water				
Original Record Correction Change in Well Use		Resources App. No.		1	Well ID			
1 LOCATION OF WATER WELL: Fraction				ion Number	Township Numb			
County: Dougla		First: Kent						
2 WELL OWNER Business: ELR. L	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:							
	lavana, Unit B		i					
Address:			Total Retail #2181					
City: Denve	State: C	O ZIP: 80239	2005 West 9	th Street, La	wrence, KS			
3 LOCATE WELL	4 DEPTH OF C	OMPLETED WELL: .	9 ft.	5 Latitude	38.9679)5(decimal degrees)		
WITH "X" IN		ter Encountered: 1)		Longitude: 95.25939 (decimal degrees)				
SECTION BOX:	N 2)! NA ft. 3) NA ft., or 4) \square D				Dry Well Horizontal Datum: WGS 84 NAD 83 NAD 27			
	WELL'S STATIC V	WATER LEVEL: 7.4	19 ft.		r Latitude/Longitude			
	below land surface, measured on (mo-day-y							
NE - NE - Dabove land surface, measured on (mo-day-				· (WAAS enabled? ☐ Yes ☐ No) ■ Land Survey ☐ Topographic Map				
w	IIIIIII NIA NIA			Online Mapper:				
1 1 1 1	We	Well water wasN/A ft.						
SW SE		after N/A hours pumping N/A gpm				■ C1		
	Estimated Yield:	Estimated Yield:N/Agpm			6 Elevation: 1005.63			
S 1 mile						Or 3 🔲 Topograpine Map		
7 WELL WATER TO BE USED AS:								
1. Domestic: 5. Public Water Supply: well ID								
☐ Household 6. ☐ Dewatering: how many wells?				11. Test Hole: well ID				
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID			Cased Uncased Geotechnical				
Livestock					12. Geothermal: how many bores?			
2. Irrigation	2. Irrigation 9. Environmental Remediation: well ID							
3. Feedlot Air Sparge Soil Vapor F 4. Industrial Recovery Injection			extraction	b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? 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)								
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
SCREEN-PERFORATED INTERVALS: From 4								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete U to 2 feet								
Grout Intervals: From								
Nearest source of pos			_					
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
□ 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? SW Distance from well? <200-feet ft.								
10 FROM TO		LOGIC LOG	FROM	TO LI	IHO. LOG (cont.) or	PLUGGING INTERVALS		
0 1	Grass/topsoil		 	····	··· · · · · · · · · · · · · · · · · ·			
1 4	Stiff clay moist dk t	prown org soil	 					
4 4.5	Limestone layer							
4.5 9		Stiff clay dry gray/orange laminated						
9	mottled Pofusal on Limosto	\no						
3	Refusal on Linesic	Refusal on Limestone		<u></u>				
	Notes:							
e <u>o constant</u>								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed or plugged								
under my jurisdiction and was completed on (mo-day-year) .4-21-20.15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No759								
Kansas Water Well	Contractor's License No	onmental LIC	iter Well Reco	ord was compl	eted on (mo-day-y	ear) 5-16-2015		
Mail 1 white con	v along with a fee of \$5.00 for	r each constructed well to: Kar	Isas Denartment	of Health and Env	ironment Bureau of W	ater, 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.								
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 1/20/2015								