WATER WELL R	ECORD	Form WWC-	5		ision of Wate		W 11 ID		
Original Record		Change in Well			ources App. N		Well ID		
1 LOCATION OF W.	ATER WELI	: Fraction			tion Numbe		er Range Number		
County: Dick	CASON	NA	VWNE 1/4	1/4	9	T 12(8)	R # E U W		
2 WELL OWNER: La	ast Name: R		2-4-8	treet or Ru	ral Address	where well is located intersection): If at owner	(if unknown, distance and		
Business: 1101	10.		- 1 d	irection from	nearest town or	intersection): If at owner	's address, check here:		
Address: //2/	/Brown	AVE.	V446 1	rom c	March 1866	GO NO1/94	DOCTION		
Address: 7		1 5 7ID: A	66441	18 8	wyTh	N GODASI J.	Mile To PASTUL		
Address: City: Junction 3 LOCATE WELL	619	state. C D ZIF.	70///	110	475	1/29° NI (
3 LOCATE WELL WITH "X" IN	4 DEPIH	OF COMPLETE	LD WELL: . A	.4.0 ft	. 5 Latitu	ide / J / U /	(decimal degrees)		
SECTION BOX:	Depth(s) Gro	undwater Encounte	red: I) /.O	% ft.	Long	Longitud W0.96.59.22.4. (decimal degrees)			
N SECTION BOX.	2) ft. 3) ft., or 4) Dry Well						□ NAD 83 □ NAD 27		
	WELL'S STATIC WATER LEVEL: ft.					Source for Latitude/Longitude:			
	below land surface, measured on (mo-day-yr)				·	GPS (unit make/model Carmin E. Perx 20			
NW NE	above land surface, measured on (mo-day-yr)				•	(WAAS enabled? Yes No)			
		Pump test data: Well water was				☐ Land Survey ☐ Topographic Map ☐ Online Mapper:			
W	after hours pumping gpm Well water was ft.					nline Mapper:			
SW SE	after hours pumpinggpm					10001			
1111	Estimated Vi	eld: 204-gnm	_				☐ Ground Level ☐ TOC		
S	Bore Hole Di	ameter: 9/1i	n, to 140	ft. and	Sourc	e: 🗌 Land Survey 🔲 🤇	GPS 🔲 Topographic Map		
1 mile		iameter: i	n. to	. ft.		Other			
7 WELL WATER TO BE USED AS:									
1. Domestic:		Public Water Suppl	y: well ID		10. 🔲 O	l Field Water Supply: le	ase		
☐ Household		Dewatering: how n	•			Hole: well ID			
☐ Lawn & Garden	7. Aquifer Recharge: well ID Cased Uncased Geotechnical								
Livestock	8. Monitoring: well ID								
2. Irrigation		vironmental Remed				osed Loop Horizont			
3. Feedlot			Soil Vapor Ex	ktraction			scharge		
4. Industrial			Injection			• • • • • • • • • • • • • • • • • • • •			
Was a chemical/bacteriological sample submitted to KDHE? Yes You lf yes, date sample was submitted:									
Water well disinfected? TVes CI No									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
8 TYPE OF CASING USED: Steel TPVC Other									
Casing height above land surface in. Weight 36.9.4.0 lbs./ft. Wall thickness or gauge No									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ ☐ PVC ☐ Other (Specify)									
☐ Brass ☐ Galvanized Steel ☐ Concrete De ☐ None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot Mill Slow Gauze Wrapped Torch Cut Drilled Holes Other (Specify)									
Continuous Slot Mill Slow Hall Slow Gauze Wrapped Torch Cut Drilled Holes Other (Specify)									
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From									
SCREEN-FERFORATED INTERVALS: From J. D. W. II. 10 II. 10									
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. to ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement Bentonite Other									
Grout Intervals: From									
Nearest source of possibl			-Ciloso	, ,	Livestock Pe	🗆 Inceptio	ide Storage		
Sewer Lines		ateral Lines ess Pool	Sewage Lag		Fuel Storage		oned Water Well		
☐ Watertight Sewer Lin			☐ Feedyard		Fertilizer Sto		II/Gas Well		
Other (Specify)				_	T OI CITIZED STO		a das won		
Direction from well?					· · · · · · · · · · · · · · · · · · ·	ft.			
10 FROM TO	L. L.	THOLOGIC LOC	Ĵ	FROM	TO	LITHO. LOG (cont.) or	PLUGGING INTERVALS		
0 1	TOA Soil	•		128	140	(901 A.7.16	hale		
	Ten/Ch	PALC		,,,	//	- Joseph ?	1/1100		
6 37	Brown	Shale							
37 44	LimisTo	ALL							
14 KM	GNIMUSH	Shall					'		
1/4 /12	Lim (STE	J. R							
72 108 Result Shall (Notes:									
168 128 VELLOW LINES TONE (WATER)									
100 / 100									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION; This water well was Constructed, reconstructed, or plugged									
under my jurisdiction at	nd was comple	eted on (mo-day-y	(ear) 10/5/	201 Rand	this record	is true to the best of m	y knowledge and belief		
under my jurisdiction and was completed on (mo-day-year) 10.5.2018 and this record is true to the best of my knowledge and belief Kansas Water Well Contractor's License No									
under the business name of									
Mail 1 white copy ald	ong with a fee of S	5.00 for each construc	cted well to: Kans	as Departmen	t of Health and	Environment Bureau of Wa	ater, GWTS Section,		
1000 SW Jackson S	t., Suite 420, Tope	eka, Kansas 66612-13	67. Mail one to W	Vater Well Ow	ner and retain o	one for your records. Teleph			
		idex.html		KSA 82a-12			Revised 1/20/2015		