WATER WELL REC	CORD	Form	ı WWC-5	Di	ivision of Wate	r Resources A	pp. No.		
1 LOCATION OF WATER WELL.		Fraction SE 1/4 SE 1/4	NI JUSTO IV	Section	on Number	Township	No. I	Range Number	
Street/Rural Address of Well Location; if unknown, distance & direction					Global Positioning System (GPS) information:				
from nearest town or intersection: If at owner's address, check here					Latitude: (in decimal degrees)				
non hearest town of intersection. If at owner's address, effect here					Longitude: (in decimal degrees)				
					Elevation: (in decimal degrees)				
					Datum: WGS 84, NAD 83, NAD 27				
2 WATER WELL OWNER: Lance Smith					Collection Method:				
RR#, Street Address, Box #: 276 76 Normandy Rd					GPS unit (Make/Model:)				
City, State, ZIP Code		•		Digital Map/Ph	ioto, 🗌 Topo	graphic N	Map,   Land Survey		
		lisburg, KS	- u v.j. i	Est. A	Accuracy: -	3 m, 🔲 3-5	m, 🔲 5-	-15 m, □ >15 m	
3 LOCATE WELL		Plugged COMPLETED V		200	2	4.20			
WITH AN "X" IN	4 DEPTH OF	COMPLETED W	VELL	<b>40.C.</b>	It.	1.200	, Pat	લ	
SECTION BOX:	Depth(s) Groundwater Encountered (1). Done ft. (2) ft. (3) ft.								
52/	WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr  Pump test data: Well water wasft. after hours pumping								
	Pun	ip test data: Well	water was	π	t. after	hours	pumpir	1g gpm	
NW NE	EST. YIELD	gpm. Well	water was	ft	after	hour	s pumpii	ng gpm	
W     E	Bore Hole Dia	meter	to	ft., and .	ın.	to	tt.		
225	WELL WATER TO BE USED AS: Public water supply Geotherman Injection well								
272 <b>3</b> € SE	WELL WATER TO BE USED AS: ☐ Public water supply ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well								
	☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well								
Was a chemical/bacteriological sample submitted to Department?  Yes  No									
S If yes, mo/day/yr sample was submitted									
' '		infected?  Yes	•	^					
5 TYPE OF CASING USED: Steel PVC Dother H.D. Poly Ethylen. 2									
CASING JOINTS: Glued Clamped Welded Threaded Fusion									
Casing diameter M. in. to JOO ft., Diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)									
Brass Galvanized Steel None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE: No ~ C									
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)									
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)  SCREEN-PERFORATED INTERVALS: From									
SCREEN-PERFORATED INTERVALS: From									
CDAVEL DACE	ZINITEDWAIS							ft.	
GRAVELTACI	X IIVI EKVALS							ft.	
6 CPOUT MATERIAL	· Neat cer						11. 10		
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
What is the nearest source of possible contamination:									
Septic tank		lines Pit privy	Livestock	nens	☐ Insecticide	storage [	Other	(specify below)	
Sewer lines	Cesspoo				Abandoned			(openity cone)	
☐ Watertight sewer l			Fertilizer s		Oil well/ga	as well			
Direction from well	West		Distance	from w	ell!50°.	····			
FROM TO	LITHOLO	GIC LOG	FROM	TO	LITHO. LO	OG (cont.) o	<u>r</u> PLUG	GING INTERVALS	
0 7 50:1		36-60 Sands	20 E						
7 9 1ime		10-108 Shal							
-		108-118 lim	-						
10 12 1im		18-151 She							
	· . I	151-154 lim	• • • •	3	4.200'	bores	0/4	gged	
19 25 line	SIONE	54-195 Shall				High		id Bentonite	
25 30 Shall		95-200 lim			W//··	1195	<u> </u>	IN DUNFONTE	
	<u> </u>	IJ SOU IM							
30 32 line	-i								
	stone								
35 36 lime	O LANDOWNI	D'S CEDTIFICA	TION. This wat	er well v	was <b>T</b> constr	nicted $\Box$ re	construc	ted or Dolugged	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or 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 5.6 This Water Well Record was completed on (mo/day/year)									
under the business name	of Ellers	FACTOR	1115 Water Well I	hv 6	gionature)		(الوجع)		
INSTRUCTIONS: Use treat	riter or hall point n	en PLEASE/PRESS FI	RMLY and PRINT of	early Pi	ease fill in blank	s and check the	correct	Swers. Send three copies	
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.									
Telephone 785-296-5524. Ser									