WATER WELL RECORD	Form W	WC-5		Division of Wate	r Resources App. N	io. L	
1 LOCATION OF WATER WELL: County: Franklin	Fraction SW ¼ SE ¼ NE	14 NE 14		11	T 17 S		
Street/Rural Address of Well Location; if unknown, distance & direction			Glob	al Positioning	System (GPS) in	nformation:	
from nearest town or intersection: If at owner's address, check here .			Lati	Global Positioning System (GPS) information: Latitude:			
South Main Street and 17th			Lon	Longitude: .9526917 (in decimal degrees) Elevation: .952.07 (T.06)			
Ottawa, KS 66067				Elevation:			
2 WATER WELL OWNER: KDHE - BER				Collection Method:			
RR#, Street Address, Box #: 1000 SW Jackson St. Ste. 410				GPS unit (Make/Model:)			
City, State, ZIP Code : Topeka, KS 66612-1367			☐ Digital Map/Photo, ☐ Topographic Map, ☑ Land Survey				
	Est.	Accuracy: Z <	3 m, 🔲 3-5 m, 🔲	5-15 m, \square >15 m			
3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 7							
					Δ. /	(2) N/A a	
SECTION BOX: Depth(s) Groundwater Encountered (1)							
WELL SSIAI	Pump test data: Well water was NA						
1 ' 1 ' 1							
NW NE X EST. YIELD. N/A gpm. Well water was ft. after th. hours pumping. N/A gpm EST. YIELD. N/A gpm EST. YIELD. N/A gpm EST. YIELD. N/A gpm It. after th. after th. hours pumping. N/A gpm It. after th. after th. hours pumping. N/A gpm It. after th. after							
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well							
Domestic Dendlet Doil field years graphy Domestaring Dother (Specific below)							
SWSE Domestic Feeding Domestic Specify below) Dewatering Dewatering Domestic Specify below) Irrigation Industrial Domestic-lawn & garden Monitoring well MW S							
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No							
S If yes, mo/day/yr sample was submitted.N/A							
Water well disinfected? ☐ Yes ☑ No							
5 TYPE OF CASING USED: Steel PVC Other							
CASING JOINTS: Glued Glamped Welded 7 Threaded							
Casing diameter .2 in. to							
Casing height above land surface. 0 in., Weight N/A lbs./ft., Wall thickness or gauge No. Schedule 40							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
☐ Steel ☐ Stainless Steel							
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
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							
From N/A ft to N/A ft From N/A ft to N/A ft							
GRAVEL PACK INTERVALS: From IQ fl. to							
From N/A ft. to N/A ft., From N/A ft. to N/A ft. GRAVEL PACK INTERVALS: From N/A ft. to N/A ft. From N/A ft. to N/A ft., From N/A ft. to N/A ft. From N/A ft. to N/A ft., From N/A ft. to N/A ft.							
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete 0 to 2-feet Grout Intervals: From 2 ft. to 1.5 ft., From N/A ft., From N/A ft., From N/A ft.							
Grout Intervals: From .2 ft. to		.N/A	ft. to	N/A ft.,	From .N/A	ft. to .N/Aft.	
What is the nearest source of possible conta	mination:	_					
		Livestock		☐ Insecticide	storage	er (specify below)	
Sewer lines Cesspool Watertight sewer lines Seepage p	Sewage lagoon	Fuel storag		Abandoned			
Direction from well		Pertilizer's Distance		Oil well/ga Zell ell □	wen	•••••••	
FROM TO LITHOLOG		FROM	TO		OG (cont) or PI II	IGGING INTERVALS	
O 0.5 Gravel		25.5	27			maist stiff	
0.5 1.5 broken Concrete	,	2013		w/chert	1 -	7 1.10. J. 2.14	
	cay Stained			TO COURT	Signe!		
very meist 5	C.						
	to reliain be a		*	-			
	Irenarias Madues			-			
	L to Vellan bin						
	efe Dide volte			/			
	T Ligial med		1-0C	5			
STAF MOIST	71.00	- 3	-MA				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 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. 759 This Water Well Record was completed on modal Near 4/5/2015							
under the business name of RAZEK Environmental LLC by (signature)							
INSTRUCTIONS: Use typewriter or ball point pen.	PLEASE PRESS FIRMLY	and PRINT cl	early. Ple	ase fill in blanks	and check the correct	answers. Send one copy to	
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit on the copy to WATER WELL OWNER and retain one for your records.							
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