| WATER WELL RECORD | | | Form WWC-5 | | | Division of Water Resources App. No. | | | |
|--|---|---|----------------|------------------------------|--|--|-----------------|------------------------|--|
| 1 LOCATION OF WATER WELL: | | | Fraction | 4. | Secti | | | Range Number | |
| Cour | ity: γ | rarion | NW4 1/4 SE | 21/4 NW/4 | | /3 | | R 3 XE □W | |
| | Street/Rural Address of Well Location; if unknown, distance & direction | | | | | Global Positioning System (GPS) information: | | | |
| from | from nearest town or intersection: If at owner's address, check here . | | | | | Latitude: (in decimal degrees) | | | |
| NITT DIA | | | | | | Longitude: (in decimal degrees) Elevation: Datum: □ WGS 84, NAD 83, NAD 27 | | | |
| J N | | V Pilsen | | | Datur | auoii: | ı □ NAD 83 □ | NAD 27 | |
| 2 WA | TER W | ELL OWNER: Dale | Klenda | - | Colle | ction Method: | r, 🗀 141D 05, 🗀 | 1410 21 | |
| 2 WATER WELL OWNER: Dale Henda RR#, Street Address, Box #: 2743 Remington Rd City. State. ZIP Code | | | | | | GPS unit (Make/Model:) | | | |
| City, State, ZIP Code : marion Ks. bbPbl | | | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m | | | | |
| 2 100 | ATE ME | 1/1Wr | ion Togi of | or De | Est. A | Accuracy: \(\) < | 3 m, ∐ 3-5 m, ∐ | 5-15 m, <u>□</u> >15 m | |
| 3 LOC | AIL WE HAN"X | "IN 4 DEPTH OF (| COMPLETED WELL | 1 56 | 7 | ft | | | |
| | TION BO | BOX: Depth(s) Groundwater Encountered (1) | | | | | | | |
| | WELL'S STATIC WATER LEVEL. A 2ft. below land surface measured on mo/day/yr Aft. | | | | | | | | |
| Pump_test data: Well water wasft. after hours pumping gpm | | | | | | | | | |
| 1 1 1 1 1 1 1 1 1 1 | | | | | | | | ping gpm | |
| W NW - NE - E Bore Hole Diameter Well water was ft. after hours pumping gpm ft. and in. to 5.0 ft. | | | | | | | | | |
| - | WELL WATER TO BE USED AS: | | | | | | | | |
| Domestic | | | | | | | | | |
| ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well | | | | | | | | | |
| | Was a chemical/bacteriological sample submitted to Department? Yes You No If yes, mo/day/yr sample was submitted | | | | | | | | |
| Water well disinfected? X Yes \(\subseteq \) No | | | | | | | | | |
| | | | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other Other | | | | | | | | | |
| CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | |
| Casing diameter in. to 50 | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ Steel ☐ Other (Specify) | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | |
| Continuous slot | | | | | | | | | |
| ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped 🛮 Saw cut ☐ Other (specify) | | | | | | | | | |
| From | | | | | | | | | |
| GRAVEL PACK INTERVALS: From 20 ft. to 5.7 ft., From ft. to ft. | | | | | | | | | |
| | | | From | ft. to | | ft., From | ft. | to ft. | |
| From | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | | |
| | Septic ta | | es Pit privy | Livestock | | Insecticide | _ | er (specify below) | |
| | Sewer lin | nes | | ☐ Fuel storag ☐ Fertilizer s | | ☐ Abandoned ☐ Oil well/ga | | | |
| | | n well | | | | ell <i>l.5.0</i> | | | |
| FROM | TO | LITHOLOG | IC LOG | FROM | TO | | | GGING INTERVALS | |
| 0 | 3 | TOD Soil | | | - | | | | |
| 3 | B | Limp | | | | | | | |
| B | 25 | VOILOW Show | ع | | | | | | |
| 25 | | Some Water | | | | | - | | |
| 25 | 42 | YEllow Sha | le | | | | | | |
| / / / | | , | | | | | | | |
| 42 | 43 | Water | | L | | | | | |
| 112 | | 73 71 | | | | | | | |
| 43 | 50 | Gray Shal | <u>e</u> | | | | | | |
| 7 CONTRACTORIS OR LANDOWNERDS CERTIFICATION. This was a second of the se | | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, The constructed of the local state of the local | | | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) 3 | | | | | | | | | |
| under the business name of Backhus Drilling by (signature) | | | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at | | | | | | | | | |
| http://www.kdheks.gov/waterwell/index.html. | | | | | | | | | |