| WATER WELL R | ECORD Form WWC-5 | Division of W | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------|-------------------------------------------------------------|
| Original Record | | Resources App | |
| 1 LOCATION OF W. | | Section Nun | |
| County: Chase SE'4 NW4 NW4 SE'4 T 21 S R7 DE W | | | |
| 2 WELL OWNER: La | ast Name: Long First: Martha & | . 1 | ss where well is located (if unknown, distance and |
| Business: Address: 9650 W. 175th Orrow direction from nearest town or intersection): If at owner's address, check here: | | | |
| | V | 1334 1866 | Creek Rd. |
| City: Open and | Park State: Ks. ZIP: (622) | (attained) | Falls, Ks. 66845 (X65) |
| 3 LOCATE WELL | 4 DEPTH OF COMPLETED WELL | iOl ft. 5 La | titude: N.38151/391(decimal degrees) |
| WITH "X" IN SECTION BOX: | Depth(s) Groundwater Encountered: 1) | 90 ft. Lo | ngitude: W. T. 366/16.78(decimal degrees) |
| N SECTION BOX: | 2) ft. 3) ft., or 4 | Dry Well Ho | rizontal Datum: WGS 84 🗆 NAD 83 🗖 NAD 27 |
| | WELL'S STATIC WATER LEVEL: | | GPS (unit make/model: Germin NU.V.I.) |
| | below land surface, measured on (mo-d | ay-yr) | GPS (unit make/model: GRAMIN |
| NW NE | above land surface, measured on (mo-d Pump test data: Well water was | | (WAAS enabled? ☐ Yes ☐ No)] Land Survey ☐ Topographic Map |
| W E | after hours pumping | _ | Online Mapper: |
| ' | Well water was | | |
| SW SE | after hours pumping | gpm | evation: 1285 ft. Ground Level TOC |
| | Estimated Yield:gpm | (a o d Sou | urce: Land Survey GPS Topographic Map |
| S 1 mile | Bore Hole Diameter: | ft. and | Other |
| 7 WELL WATER TO BE USED AS: | | | |
| 1. Domestic: | 5. ☐ Public Water Supply: well ID | 10. 🗆 | Oil Field Water Supply: lease |
| Household | 6. ☐ Dewatering: how many wells: | ? 11. Te | st Hole: well ID |
| ☐ Lawn & Garden | 7. Aquifer Recharge: well ID | | Cased Uncased Geotechnical |
| Livestock | 8. Monitoring: well ID | | cothermal: how many bores? |
| 2. ☐ Irrigation 3. ☐ Feedlot | 9. Environmental Remediation: wel ☐ Air Sparge ☐ Soil Vap | | Closed Loop |
| 4. Industrial | ☐ Recovery ☐ Injection | | Other (specify): |
| | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes No If yes, date sample was submitted: | | | |
| 8 TYPE OF CASING USED: Steel 7 PVC Other CASING IOINTS: M'Glued O Clamped O Welded O Threaded | | | |
| 8 TYPE OF CASING USED: Steel PVC Other | | | |
| Casing height above land surface | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ Steel ☐ 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) | | | |
| ☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole) | | | |
| SCREEN-PERFORATED INTERVALS: From | | | |
| GRAVEL PACK INTERVALS: From ft. to ft. to | | | |
| 9 GROUT MATERIAL; Neat cement Cement grout Bentonite Other | | | |
| Grout Intervals: From | | | |
| Nearest source of possibl | e contamination: Lateral Lines Pit Priv | v ☐ Livestock | Pens |
| Sewer Lines | ☐ Cess Pool ☐ Sewage | | |
| ☐ Watertight Sewer Lin | | | |
| ☑ Other (Specify) Circle | | | |
| | South Distance from | | ft. |
| 10 FROM TO 2 | LITHOLOGIC LOG | FROM TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
| | 10001 | | |
| 70 12 | UN CONTRACTOR | | |
| 12 90 | Varigated Shale | | |
| a0 94 | Chert line | | |
| 94 106 | Variable Chale | | 4 |
| | | Notes: Orilled | to 135; evicuntered Silt mater |
| Notes: Drilled to 135; encountered silt nater Concreted back to 106 & shit off selt. | | | |
| | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) | | | |
| Kansas Water Well Cor | ntractor's License No 203 This | Water Well Record was | completed on (mo-day-year) 3-16-15 |
| Kansas Water Well Contractor's License No | | | |
| Mail I 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 | s.gov/waterwell/index.html | KSA 82a-1212 | Revised 7/10/2015 |