WATER WELL RECORD			Form WWC-5		Division of Water Resources App. No.			
	TION OF WA		Fraction		Section Number	Township No.	Range Number	
County	Harre	e y	Ne4SWAN	21/4 1/4		T 23 S	R ZE W	
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here Latitude:								
110III IIC	carest town of h	mersection. If at o	wher's address, thet	Longitude: (in decimal degrees)				
				Elevation:				
2 WATER WELL OWNER, M. 1 ()					<u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
2 WATER WELL OWNER: Mike Unruh RR#, Street Address, Box #: 304 Master City. State. ZIP Code : 304 Master					Collection Method: GPS unit (Make/Model:)			
City, State, ZIP Code : 30 Jo Maszer						☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey		
Newton, KS. 6/114 Est. Accuracy: □ <3 m, □ 3-5 m, □ 5-15 m, □ >15 m								
3 LOCAT			,	L	<i>D</i> ft.			
	WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL					A (3	3) A	
N WELL'S STATIC WATER LEVEL36ft. below land						neasured on mo/da	1V/vr 4-3=//	
Pump test data: Well water wasft. after hours pumping g							oing gpm	
EST. YIELD Well water wasft. after hours pumping							ping gpm	
w	$V = \{ $							
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well								
SW SE Domestic Feedlot Oil field water supply Dewatering Other (Specify below)								
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well								
S If yes, mo/day/yr sample was submitted								
Water well disinfected? Yes No								
5 TYPE OF CASING USED: Steel Z-PVC Other								
CASING JOINTS: Qued								
Casing diameter								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ TVC ☐ Other (Specify)								
SCREEN OR PERFORATION OPENINGS ARE:								
☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torchout ☐ Drilled holes ☐ None (open hole)								
☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify)								
SCREEN-PERFORATED INTERVALS: From								
From								
GRAVEL FACK INTERVALS: From								
6 GROUT MATERIAL: Neat cement Cement grout Dentonite Other								
Grout Intervals: From								
What is the nearest source of possible contamination:								
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)								
	ewer lines	☐ Cesspool	Sewage lagoon	☐ Fuel storage				
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well Direction from well ☐ ☐ Distance from well ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐								
	ТО	LITHOLOGI		FROM			GGING INTERVALS	
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		, ,						
1/	13/1	18 Shall	2					
65 1	(a) (B)	L lo1 (0/10/1	12 4 0				
03	CYCYD	mbled S	naie y	ates				
62	Po Gra	Ly Shale	2					
- CONTE		· · · · · · · · · · · · · · · · · · ·	G CERTIFICATION					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, a reconstructed, or plugged								
under my jurisdiction and was completed on (mo/day/year)								
under the business name of Backhus Drillight by (signature)								
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRM IN</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								
retephone /8	0J-470-JJ44. Se n	u one copy to WAIL	A WELL OWNER and	icialli one for v	oui recorus. Include fee	or \$3.00 for each co	instructed well. Visit us at	