WATER WELL RECO		Form W	WC-5	Division of Water	er Resources App. No		
County: BUILLE (DI)		Fraction 1/4 S 2	=1/4SW/4	Section Number		Range Number R 3 E W	
Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information:							
from nearest town or into	owner's address, check	Latitude: (in decimal degrees)					
				Longitude: (in decimal degrees) Elevation:			
2 WATER WELL OWNER Chrie & Montone				Datum: WGS 84, NAD 83, NAD 27			
2 WATER WELL OWNER Chries montage RR#, Street Address, Box #: 15 & 32 NW 150 #				Collection Method: GPS unit (Make/Model:)			
City, State, ZIP Code : 15 # 32 11 W 75			☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey				
	Neu	ston, Kse	5/114	Est. Accuracy:	<3 m, 3-5 m,	5-15 m, □ >15 m	
3 LOCATE WELL		COMPLETED WEL	1.1.				
WITH AN "X" IN 4 SECTION BOX: I	DEPIH OF C	Water Engagetered	(1) 7×.	It.	A (*	ν _ Α	
N N							
Pump test data: Well water wasft. after							
EST. YIELD. 20 gpm Well water was ft. after hours pumping.							
W NW NE EST. YIELD. 2 C.gpm Well water was						ft.	
						njection well	
SWSE Domestic Feedlot Oil Field water supply Dewatering Other (Specify below)							
Was a chemical/bacteriological sample submitted to Department? Yes No							
S If yes, mo/day/yr sample was submitted							
water went distincted: 2 105 110							
5 TYPE OF CASING USED: Steel PVC Other Other							
CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter ft., Diameter ft., Diameter ft., Weight Casing height above land surface in., Weight CDR. 26 lbs./ft., Wall thickness or gauge No.							
Casing diameter							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
Steel Steel PVC Other (Specify)							
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
Continuous slot							
Louvered shutter							
From ft. to ft. From ft. to ft.							
From							
From							
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.							
What is the nearest source of possible contamination:							
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well							
☐ Sewer lines ☐ Watertight sewer line			Fertilizer st	orage Oil well/g	gas well		
Direction from well							
FROM TO	LITHOLOG	IC LOG	FROM	TO LITHO. L	OG (cont.) or PLU	GGING INTERVALS	
	Coil						
3 32 YEI	ow Cla	y			OFCE	WED.	
20 54 1					ne-ve	IVEU	
32 35 hime	0				NOV O	7 0040	
35 42 Hea	Shale	2 / (2)			NOV 2	4 Z01Z	
72 1/3 Yell	low Sho	u 18			QHDC5116	C MATER	
72 71-1.	0		1		BUREAU C	WAIEH	
73 75 Lime 75 76 Crumbled Shale+ Water							
76 83- Blue Shale							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed. reconstructed. reconstru							
under my jurisdiction and was completed on (mo/day/year). The and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year)							
under the business name of							
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. 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.							
KSA 82a-1212							