| WA | ATER WELL RE | CORD | Form WWC- | 5 | Division of Water | r Resources; App. No. | | |
|--|---|----------------------------|------------------------------|-------------|---------------------------------|------------------------------|--------------------------|--|
| 1 | LOCATION OF W | | Fraction | | Section Number | Township Number | Range Number | |
| | County: | gwich | NE 1/4 NW1/45 | | 28 | T 250 | R EW | |
| | located within city? | • 1 | or city street address of we | 1 | Global Positioning Latitude: | Systems (decimal deg | grees, min. of 4 digits) | |
| | located within city? | 8905 K | Edgewood | / | | | | |
| 2 | WATER WELL O | | & Clark | | Elevation: | | | |
| | RR#, St. Address, B | ox# : 2900 | | 10 | Datum: | | | |
| | City, State, ZIP Cod | | Ridgewood | 7 | Data Collection N | Method: | | |
| 3 | LOCATE WELL'S | 4 DEPTH OF CO | OMPLETED WELL | < | ?. <i>Q</i> ft. | vicinoa. | | |
| | LOCATION | | 7 TELED WELL | | | | | |
| | WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1) | | | | | | | |
| | SECTION BOX: WELL'S STATIC WATER LEVEL | | | | | | | |
| | N Pump test data: Well water was | | | | | | | |
| | Est. Yieldgpm: Well water wasft. after | | | | | | | |
| | NW NE 1 D | | | | | | | |
| W | W E 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 2 Domestic (lawn & garden) 10 Monitoring well | | | | | | | |
| | | | | | | | | |
| | SW SE Was a chemical/bacteriological sample submitted to Department? Yes No | | | | | | | |
| | Sample was submitted | | | | | | | |
| | S | | | | | • | 1 | |
| 5 | TYPE OF CASING | | | | | G JOINTS: Glued. | | |
| 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded | | | | | | | | |
| | 2 PVC 4 AE | | | | | Threaded | | |
| Blank casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. | | | | | | | | |
| Casing height above land surface | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) | | | | | | | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | |
| 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) | | | | | | | | |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | |
| Fromft. toft., Fromft. toft. | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3 Bentonite) 4 Other | | | | | | | | |
| Grout Intervals: From | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | |
| 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify | | | | | | | | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) | | | | | | | | |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well Direction from well? How many feet? | | | | | | | | |
| | ROM TO | | GIC LOG | FROM | | PLUGGING INT | ERVALS | |
| (| 2 | Jun Sail |) | 110171 | | 12000110111 | | |
| | 2 23. | China | | | | | | |
| | 3 54 | Peline Sha | de | | | | | |
| 3 | 4 66 | Blue St | all + limeston | e | | | | |
| 4 | 26 74 | Red Sta | le, | | | | | |
| _ | 74 80 | Blue St | Kale_ | | | | | |
| <u> </u> | | | | | | | | |
| _ | | | | - | | | | |
| - | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This water well was (2) and a standard (2) a | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) | | | | | | | | |
| Kansas Water Well Contractor's License No | | | | | | | | |
| under the business name of Chase Wellin 9 by (signature) Chase | | | | | | | | |
| IN | STRUCTIONS: Use type | ewriter or ball point pen. | PLEASE PRESS FIRMLY and I | PRINT clear | ly. Please fill in blank | s, underline or circle the c | orrect answers. Send top | |
| three copies 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 to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html. | | | | | | | |
| http://www.ndiicns.gov/waterweit/index.intiii. | | | | | | | | |