|  |   |   |  | Co   | enty &                                       | ermet                                   |  |
|--|---|---|--|--|--|---|--|
| WATER WELL RECORD Form WWC-5   |   |   |  | Division of Water  |  |   |  |
| Original Record  | Correction   Char                           |   | Reso   | ources App. N  | lo.  | Well ID                                 |  |
| 1' LOCATION OF Y   |   | Fraction                                      | Sec  | tion Numbe   |  |   |  |
| County: 2 WELL OWNER: La   | 29 wick                                     | 1/4/W/NW/                                     | Street or Du                                     |  | T 25 S                                       | R / XE D W                              |  |
| Business:  | ist Name: Pharec                            | O FIRST MALEY                                 |  | reet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:   |  |   |  |
| Business: 884 N Lidden R direction from nearest town or intersection): If at owner's address, check here: Address; Address;  |   |   |  |  |  |   |  |
| City: Valley Center State: K-ZIP:  |   |   |  |  |  |   |  |
| 3 LOCATE WELL/ A DEPTH OF COMPLETED WELL.  |   |   |  | ft. 5 Latitude:(decimal degrees)   |  |   |  |
| WITH "X" IN SECTION BOX:   | Depth(s) Groundwater Encountered: 1)        |   |  | ft. Longitude:(decimal degrees)  |  |   |  |
| N N  | 2)  |   | Dry Well Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27       |  |  |   |  |
|  |   | ATER LEVEL:                                   |  | Source for Latitude/Longitude:  GPS (unit make/model:)   |  |   |  |
| NWNE   | above land surface, measured on (mo-day-yr) |   |  | (WAAS enabled? ☐ Yes ☐ No)   |  |   |  |
|  | Pump test data: Well                        |   | ☐ Land Survey ☐ Topographic Map ☐ Online Mapper: |  |  |   |  |
| W E  | after hours pumping gpr Well water was ft.  |   |  |  | nline Mapper:                                | *************************************** |  |
| SW SE  | after hou                                   | . gpm   | 6 Elevation:ft. Ground Level TOC                 |  |  |   |  |
| S  | Estimated Yield: Bore Hole Diameter:        | ft. and                                       |  | Source:   Land Survey   GPS   Topographic Map  |  |   |  |
| mile   |   | in. to  |  |  | ☐ Other                                      |   |  |
| 7 WELL WATER TO BE USED AS:  |   |   |  |  |  |   |  |
| 1. Domestic: ☐ Household   |   | /ater Supply: well ID<br>ing: how many wells? |  |  | 10.  Oil Field Water Supply: lease           |   |  |
| Lawn & Garden  | 7. 🗌 Aquifer                                | Recharge: well ID                             |  | Cased Uncased Geotechnical   |  |   |  |
| Livestock  |   | ng: well ID                                   |  | 12. Geothermal: how many bores?  |  |   |  |
| 2. ☐ Irrigation 3. ☐ Feedlot   | 9. Environmental Remediation: well ID       |   |  |  | b) Open Loop Surface Discharge Inj. of Water |   |  |
| 4. Industrial Recovery Injection 13. Other (specify):  |   |   |  |  |  |   |  |
| Was a chemical/bacteriological sample submitted to KDHE?  Yes No If yes, date sample was submitted:  |   |   |  |  |  |   |  |
| Water well disinfected? ☐ Yes ☐ No  8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other   |   |   |  |  |  |   |  |
| Casing diameter  |   |   |  |  |  |   |  |
| Casing height above land surface   |   |   |  |  |  |   |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:         □ Steel       □ Stainless Steel       □ Fiberglass       □ Other (Specify)   |   |   |  |  |  |   |  |
| ☐ Steel     ☐ Stainless Steel     ☐ Fiberglass     ☐ PVC     ☐ 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)  |   |   |  |  |  |   |  |
| SCREEN-PERFORATED INTERVALS: From  |   |   |  |  |  |   |  |
| GRAVEL PACK INTERVALS: From 4.4. ft. to ft., From ft., From ft., From ft. to ft.   |   |   |  |  |  |   |  |
| 9 GROUT MATERIAL: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \  |   |   |  |  |  |   |  |
| Grout Intervals: From  |   |   |  |  |  |   |  |
| ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage   |   |   |  |  |  |   |  |
| ☐ Sewer Lines       ☐ Cess Pool       ☐ Sewage Lagoon       ☐ Fuel Storage       ☐ Abandoned Water Well         ☑ Watertight Sewer Lines       ☐ Seepage Pit       ☐ Feedyard       ☐ Fertilizer Storage       ☐ Oil Well/Gas Well   |   |   |  |  |  |   |  |
| University watertight Sewer Lines Seepage Pit Peedyard Fertilizer Storage University as well Other (Specify)   |   |   |  |  |  |   |  |
| Direction from well?   |   |   |  | The state of the s |  | THE COLOR DIFFERENCE OF                 |  |
| 10 FROM TO   | LITHOLO                                     | OGIC LOG                                      | FROM   | TO   | LITHO. LOG (cont.) or P                      | LUGGINGINTERVALS                        |  |
| 7 33   | 10 Page                                     | 1 .   |  | 4 6  | <del></del>                                  |   |  |
| 33 49  | med-St                                      | end   |  |  |  |   |  |
| 49 100   |   | ·   |  |  | · · · · · · · · · · · · · · · · · · ·        | · · · · · · · · · · · · · · · · · · ·   |  |
|  |   |   |  |  |  |   |  |
| Not  |   |   |  | otes:  |  |   |  |
|  |   |   |  |  |  |   |  |
| 11 CONTRACTORS OF LANDOWNED'S CERTIFICATION. This was all the state of |   |   |  |  |  |   |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Aconstructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year).  |   |   |  |  |  |   |  |
| under my jurisdiction and was completed on (mo-day-year) . (a)   |   |   |  |  |  |   |  |
| under the business name of   |   |   |  |  |  |   |  |
| Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.   |   |   |  |  |  |   |  |