WATER WELL RECORD Form WWC-5 NW NE SW 5W Division of Water Resources App. No. Well ID													
Origin	al Record	Correction		30 III W 611	USC	_ Kes	ources App.			Well ID	<u> </u>		
	TION OF V	VATER WEI	.L://	Fraction	Bud Mills	Se Se	ction Numb	er	Township Numb		ige Number		
1/ LOCATION OF WATER WELL: Fraction Fraction Section Number Township Number Range Number T Z S R X E W													
2 WELL OWNER: Last Name: Walkern First: Street or Rural Address where well is located (if unknown, distance and													
Business: 2209 timber Orock Con direction from nearest town or intersection): If at owner's address, check here: Address: 2209 timber Orock Con direction from nearest town or intersection): If at owner's address, check here:													
Address:		*				7 1	The sur	ms	es creek	2 CUT			
Address: Wichito State K2 ZIP: 67204													
3 LOCAT		4 DEPTH	OF CON	APLETE	ED WELL:	3/ 8	5 Lotid	huda.			(daaimal daaraas)		
WITH		Depth(s) Gr	oundwater	Encounte	red: 1)	P A							
SECTION BOX: N Depth(s) Groundwater Encountered: 1)								Longitude:					
WELL'S STATIC WATER LEVEL: ft Source for Latitude/Longitude:											IAD 21		
	below land surface, measured on (mo-day-yr) 3-2-7-								GPS (unit make/model:)				
NW -	above land surface, measured on (mo-day-yr)							(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft.							☐ Land Survey ☐ Topographic Map					
W	E after hours pumping gpm Well water was ft.							Online	Mapper:	• • • • • • • • • • • • • • • • • • • •	•••••		
after hours pumping													
	Estimated Vield: cmm							ation:	ft	. 🔲 Ground	Level TOC		
	S	Bore Hole I	Diameter:	.9 iı	n. to	ft. and	Source	<u>ce</u> : 🔲 1	Land Survey 🔲	GPS 🔲 To	pographic Map		
S Bore Hole Diameter:in. toft. andSource: Land Survey GPS Topographic Mapin. to ft.													
7 WELL WATER TO BE USED AS:													
1. Domestic: 5. Public Water Supply: well ID													
	Household 6. Dewatering: how many wells?								well ID				
	Lawn & Garden 7. Aquifer Recharge: well ID								☐ Uncased ☐ (
Livestock 8. □ Monitoring: well ID													
2. ☐ Irrigat 3. ☐ Feedle			Air Sparg		Soil Vapor				coop ☐ Horizoni oop ☐ Surface Di				
4. Indust			Recovery		Injection	Extraction							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes 7 No If yes, date sample was submitted:													
				C D Oth		CASI	NG IOINTS	s. M	Glued	I □ Welder	I □ Threaded		
									in. to		т 🗀 ттеацец		
Casing heig	tht above land	surface	7.2. ir	ı. Wei	ght	lbs./ft.	Wall thic	kness (or gauge No	50			
TYPE OF	SCREEN O	R PERFORAT			: _								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)													
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous Slot													
	inuous Slot ered Shutter	Mill Slot		auze Wra					Other (Specify)		•••••		
						w Cut			ft., From	ft to	A		
									ft., From				
									11., 110111				
									ft. to		• • • • • • • • • • • • • • • • • • • •		
		le contaminati		11., 1 101		11. 10	16., 1 10111			16.			
☐ Septic			Lateral Line	es l	☐ Pit Privy		Livestock Po	ens	☐ Insection	ide Storage			
Sewer			Cess Pool		☐ Sewage La		Fuel Storage		☐ Abando	oned Water V	Well		
	tight Sewer Li	nes 🔲 S	Seepage Pit	l	☐ Feedyard		Fertilizer Ste	orage	☐ Oil We	ll/Gas Well			
Other Direction fr	(Specify)	month	<i>?</i>			. 110			0				
10 FROM	TO T	1	TTUOL A		stance from w				ft. IO. LOG (cont.) or		TINTEDVALC		
D FROM	4	07-	ITHOLOGO A		<u> </u>	FROM	TO	LIII	io. Log (cont.) of	LLUUGIN	JINIEKVALS		
4	1/2	F		T	- X								
73	3/	Cons	2 -	7	0								
	1	Gar		7	- Con								

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11 CONT	'RACTOR'S	S OR LANDO	OWNER'S	S CERT	IFICATION	I: This wate	r well was [COL	istructea, 🗀 recc	nstructed,	or 🔲 plugged		
11 CONT under my j	RACTOR'S	S OR LANDO nd was compl	OWNER'S leted on (m	S CERT	IFICATION ear)	This wate	r well was [this record	is true	e to the best of m	nstructed, y knowled	or plugged ge and belief.		
Kansas Wa	ater Well Co	ntractor's 100	ense N97		This Wa	iter Well Re	ora was co	mplete	ed on (mo-day-ye	ear) 🗷 🗔			
Kansas Wa under the b	ater Well Con ousiness nam	e of	ense No.	2/2	This Wa	iter Well Re	ord Was co	mplete	ed on (mo-day-ye	ear) 3			
Kansas Wa under the b	ater Well Con ousiness nam CTIONS: Send o	e of	well own	ER and retai	n one copy for yo	ur records. Submi	t fee of \$5.00 fo	mplete r each co	ed on (mo-day-ye	th one (white) c	opy to Kansas		