WATER WELL RECORD		Form WWC-5		Division of Water Resources App. No.		
1 LOCATION OF WATER WELL County:		Fraction F 1/4 N	EN NEW	Section Number	Township No.	Range Number R ■E □W
Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information:						
from nearest town or intersection: If at owner's address, check here . Latitude:						
I - P D PD				Longitude: (in decimal degrees)		
1915 Park Place				Elevation:		
2 WATER WELL OWNER: ms cullen as				Datum: WGS 84	4, □ NAD 83, □	NAD 27
2 WATER WELL OWNER: ms cullenger RR#, Street Address, Box #: 1915 Park Place				Collection Method: GPS unit (Make/Model:)		
City, State, ZIP Code : wellt Ke				☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey		
City, State, Zir Cod	it so		Est. Accuracy:			
3 LOCATE WELL				143		
WITH AN "X" IN	4 DEPTH OF	COMPLETED WEL	L <u></u>	ft.		
SECTION BOX:						
WELL'S STATIC WATER LEVEL						
Pump test data: Well water was						oing gpm
						ping gpm
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well						
SW SE						
Was a chemical/bacteriological sample submitted to Department? Yes No						
S If yes, mo/day/yr sample was submitted						
Water well disinfected?						
5 TYPE OF CASING USED: Steel PVC Other Other						
CASING JOINTS: Glued Clamped Welded Threaded						
Casing diameter 5 in. to 36 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in., Weight lbs./ft., Wall thickness or gauge No 6.0						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
Steel Stainless Steel PVC Other (Specify)						
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)						
SCREEN OR PERFORATION OPENINGS ARE:						
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)						
Louvered shutter Key punched Wire wrapped Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.						
From						
GRAVEL PACK INTERVALS: From						
From ft. to ft., From ft. to ft.						
Grout Intervals: From						
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						
Watertight sewer lines Geepage nit Feedyard Fertilizer storage Oil well/gas well Direction from well Distance from well						
FROM TO		20 LOC	FROM			GGING INTERVALS
	LITHOLOG	<u> </u>	FROM	10 LITHO. LC	og (cont.) or PLU	GUING INTERVALS
	My - Je	7 200				
	varge I	t In a				
7 70	- Comment	an - will				
		7/ //				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, □ reconstructed, or □ plugged						
under my jurisdiction and was completed on (mo/day/year) . The state of my knowledge and belief.						
Kansas Water Well Contractor's License Nov. 4.72. This Water Well Report was completed on (my/day/year) 3-/6-2//						
under the business name of Deardon Lung Tway by (signature) bure Back						
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</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 http://www.kdheks.gov/waterwell/index.html.						
KSA 82a-1212						