WATER WELL RI Original Record			WWC-5 e in Well Use			sion of Wate arces App. N		Well ID		
1 LOCATION OF WA			Fraction	((%)	s Secti	ion Numbe			ange Number	
County: Seda	NCIL		1/4 8 1/45	W1/48	W/4	2	T		Œ U W	
2. WELL OWNER: Ast Name: First: Street or Rural Address where well is located (if unknown distance and										
Business: Address: Address: Address:										
Address 2214 N Lindsey CI										
City: Wick	rita	State:	JZIP: 672	78		WICK	ritzy KS	6722	.8	
3 LOCATE WELL	4 DEPTI	TOF COM	IPLETED WE	тт. (00 a	5 Latite	ıde:		¹ (decimal degrees)	
WITH "X" IN			Encountered: 1)			(
SECTION BOX:	2)	2) ft. 3) ft., or 4). □ Dry Well Datum: □ WGS 84 □ NAD 83 □ NAD 27								
×	WELL'S STATIC WATER LEVEL:									
	below below	land surface,	, measured on (m	o-day-yı)///	\Box \Box \Box	PS (unit make/mode			
NW NE	☐ above land surface, measured on (mo-day-; Pump test data: Well water was				·)	(WAAS enabled? ☐ Yes ☐ No)				
W	after hours pumping				nm	☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
	Well water was ft				J	Gilline Wapper.				
\$W \$E	atter nours pumping g					(T31 .	4.	Λ Π α	11 1 7 700	
	Estimated Yield:					6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S mile	S Bore Hole Diameter: in. to					Source	e:			
7 WELL WATER TO	DETICED		in. to		π.		, LJ Other			
1. Domestic:			tar Supply: wall	ID		10 🖂 🔾	1 Field Water Suppl	v. lease		
1. Domestic: 5. ☐ Public Water Supply: well ID ☐ Household 6. ☐ Dewatering: how many wells?										
Lawn & Garden							ased Uncased			
Livestock						12. Geothermal: how many bores?				
	2. \square Irrigation 9. Environmental Remediation: well ID.					a) Closed Loop Horizontal Vertical				
3. Feedlot		Air Sparge			traction		pen Loop Surfac			
4. Industrial Recovery Injection 13. Other (specify):										
Was a chemical/bacteriological sample submitted to KDHE? Yes Who If yes, date sample was submitted: Water well disinfected? The year of No.										
Water well disinfected? ☐ Yes ☐ No 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other										
Casing diameter in. to										
Casing height above land surface in. Weight 2.4. Ibs./ft. Wall thickness or gauge No										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ ☐ 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										
9 GROUT MATERIAL: \(\text{Neat cement } \) Cement grout \(\text{N/Rentonite} \) \(\text{Other } \).										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Nearest source of possible contamination:										
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage										
Sewer Lines										
				rom wel	1? 🖋	lan (LITHO LOG (con	ft.		
10 FROM TO		LITHOLO	GIC LOG		FROM	ТО	LITHO. LOG (con	t.) or PLUGGI	NG INTERVALS	
0 1	100 S	501/		TO CONTRACT TO SERVICE						
110	gay	6								
10 50	<u> zna</u>	<u>e</u> loek								
50 60	Byp	K-V-K-N-								
					:				***************************************	
		 			Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo day-year)										
under my jurisdiction and was completed on (moreay-year)										
under the business name of Well May Dri 11/26 UC 102415 Custle										
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas										
Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.										
Visit us at http://www.kdh	eks.gov/waterwe	II/index.html			KSA 82a-12	.12		Re	evised 9/10/2012	