WATER WELL RECORD Form WWC-5 Division of Water									
Correction Change in Well Use					Resources App. No Well ID				
1 LOCATION OF WATER WELL: Fraction			raction				ber Range Number		
					NW ¼ 9 T 29 S R 2 🗷 E 🗆 W				
	ast Name: GIPS	ON F		Street or Rural Address where well is located (if unknown, distance and					
Business:		<b>D</b>		direction from nearest town or intersection): If at owner's address, check here:					
Address: 112 S. Springwood Dr. Address:									
City:	5	State: Kansas 2	ZIP:	306 N. Ce	dar Rano	ch St. Derby, H	Cansas 67037		
<b>3</b> LOCATI				0 0					
WITH "2			ETED WELL:						
	SECTION BOX:         Depth(s) Groundwater Encountered: 1)           N         2)								
N WELL'S STATIC WATER LEVEL: 60					Horizontal Datum: El wGS 84 El NAD 83 El NAD 27				
	Below land surface, measured on (mo-day-y					BORS (unit make/model: <b>iPhone</b> )			
	N₩NE above land surface, measured on (mo-				r) (WAAS enabled? $\Box$ Yes $\Box$ No)				
	Pump test data: Well water was						and Survey		
w	E after hours pumping				gpm Online Mapper:				
	Well water was								
			after hours pumping			6 Elevation:ft. Ground Level TOC			
	<u>نے ا</u>		Estimated Yield:gpm Bore Hole Diameter: 12 in. to 69 ft.			Source: Land Survey SGPS Topographic Map			
	5 nile	Bore noie Di	in. to						
7 WELL WATER TO BE USED AS:									
1. Domestic:       5. □ Public Water Supply: well ID       10. □ Oil Field Water Supply: lease									
	☐ Household 6. □ Dewatering: how many we								
🗷 Lawn d	Lawn & Garden 7. 🗌 Aquifer Recharge: well ID								
🗌 🗌 Livesta	Livestock 8. Monitoring: well ID								
	☐ Irrigation 9. Environmental Remediation: well II					a) Closed Loop 🔲 Horizontal 📋 Vertical			
	3. 🗌 Feedlot 🗌 Air Sparge 🔲 Soil Vapor E					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 JOINTS: Glued Clamped Welded Threaded									
Casing diameter in. to									
Casing height above land surface12 in. Weight .2., 35 lbs./ft. Wall thickness or gauge NoSDR-26									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
Steel       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)									
□ Louvered Shutter □ Key Punched □ Wire Wrapped ■ Saw Cut □ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From 20 ft. to 60 ft., From ft. to ft. to ft. to ft.									
GRAVEL PACK INTERVALS: From 24 ft. to 60 ft., From ft. to ft., From ft. to ft.									
9 GROUT MATERIAL:  Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination:									
□ 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									
Watertight Sewer Lines       Seepage Pit       Feedyard       Fertilizer Storage       Oil Well/Gas Well         Other (Specify)       Other (Specify)       Other (Specify)       Other (Specify)									
Direction from well? <b>West</b>									
10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS									
0		topsoil							
3		clay							
14		brown shal	e						
22	60	gray shale							
					Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 🗷 constructed, 🗌 reconstructed, or 🗋 plugged									
under my jurisdiction and was completed on (mo-day-year) 10/27./2022 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No236 This Water Well Record was completed on (mo-day-year) 11/1/2022									
under the business name of									
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,									
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.									
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									