WATER WELL R		WWC-5	Divis	sion of Water			
Original Record		nge in Well Use		irces App. No.		Well ID	
1 LOCATION OF W	ATER WELL:	Fraction		ion Number	Township Numb		
County: Cowley	SE¼ 6 T 33 S R 3 ■ E 🗆 W						
2 WELL OWNER: Last Name: McClung First: Jim Street or Rural Address where well is located (if unknown, distance and							
Business: 20634 31	at Daniel	1	direction from no	n from nearest town or intersection): If at owner's address, check here:			
Address: 20634 31st Road 2 1/2 North, 6 1/4 West of Hackney							
City: Winfield State: KS ZIP: 67156							
3 LOCATE WELL	LOCATEWELL					Q	
WITH "X" IN	4 DEPTH OF COMPLETED WELL: 35 ft. 5 Latitude: 37.2038 (decimal degree Depth(s) Groundwater Encountered: 1) ft. Longitude: 97.1377 (decimal degree						
SECTION BOX:		3) ft., or 4)				1.1(decimal degrees) 4 ■ NAD 83 □ NAD 27	
N		ATER LEVEL:13			or Latitude/Longitude		
	below land surfa	ce, measured on (mo-day-	yr)4-4-18	GPS (unit make/model:)			
NW NE	above land surfa	ce, measured on (mo-day-y	/r)	(WAAS enabled? ☐ Yes ☐ No)			
		l water was ft		☐ Land Survey ☐ Topographic Map			
W	after ho		Onli	Online Mapper:			
SW SE	Well water was						
X	Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC		
S	Bore Hole Diameter:10 in. to35 ft. and			Source: Land Survey GPS Topographic Map			
1 mile in. to ft.							
7 WELL WATER TO BE USED AS:							
1. Domestic:		Water Supply: well ID				ease	
☐ Household ☐ Lawn & Garden	Dewatering: how many wells? Aquifer Recharge: well ID			11. Test Hole: well ID			
Livestock		ring: well ID		12. Geothermal: how many bores?			
2. Irrigation		ntal Remediation: well ID		a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot				b) Open Loop Surface Discharge Inj. of Water			
4. 🔲 Industrial	☐ Recove	ry 🔲 Injection					
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	VC Other	CASIN	G JOINTS:	■ Glued □ Clampe	d ☐ Welded ☐ Threaded	
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 18 in. Weight SDR-26 lbs/ft. Wall thickness or gauge No.							
Casing height above land surface							
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)							
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)							
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-PERFORAT	ED INTERVALS: Fi	om35 ft. to15	ft., From	ft. to .	ft., From	ft. to ft.	
GRAVEL PACK INTERVALS: From35 ft. to13 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							
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well							
■ Other (Specify) None Direction from well?							
10 FROM TO		OGIC LOG	FRÔM	TO L	TTHO, LOG (cont.) o	or PLUGGING INTERVALS	
	Top soil		 				
	Soft sandy clay Sand & gravel- sma	Il mad alasa lasas	+				
	Sano & gravei- sma coarse	iii iiieu ciean ioose	+				
	Hard rock w/ green	shale	 				
	i iai a tock w/ green	oi iale					
			Notes:				
			1,000.				
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)4-4-18							
Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo-day-year)4-18-18 under the business name of Rosencrantz-Bemis Ent Inc Signature							
under the business nam	e ofKosencrant	each constructed well to: Ver	Sig	gnature	Wirenment Burney	Vater GWTS Section	
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.kdhek			KSA 82a-12		. 101 7000 1000100. 10101	Revised 7/10/2015	