WATE	R WELL RE	ECORD	Form WWC-5	Divis	ion of Water Rese	ources: App. No.		
1 LOCA	TION OF WA	TER WELL:	Fraction NE 4 NW 4 1	NW 1/4	ection Number 12	Township Number	Range Number R 24 E	
County: Cherokee NE 1/2 NW 1/2 NW 1/2 E Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)								
located within city? 1910 Military Ave., Baxter Springs, KS Latitude: N 37.01603° Longitude: W 94.73606°								
2 WATER WELL OWNER: Baxter State Bank					Elevation: 845.24 pin/844.94 toc			
RR#, St. Address, Box # : 1910 Military Ave					Datum: above mean sea level			
City, State, ZIP Code : Baxter Springs, KS Data Collection Method: legal survey							4	
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 15 ft.								
LOCA					MW9			
1	I AN "X" IN	Depth(s) Groun	ndwater Encountered 1		ft. 2	tt. 3	ft.	
SECT	ION BOX:	WELL'S STA	TIC WATER LEVEL	1.96 ft.	below land surf	ace measured on mo	day/yr 4/1/09	
N Pump test data: Well water was ft. after hours pumping gr								
Est. Yield gpm: Well water was ft. after hours pumping gpm								
NW NE WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well								
W I Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)								
W 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10) Monitoring well								
SW SE SE								
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs								
S Sample was submitted Water Well Disinfected? Yes No X								
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped								
1 St	eel 3 F	RMP (SR) 6	Asbestos-Cement	Other (sp	pecify below)	Weld	led	
(2) PV	(2) PVC 4 ABS 7 Fiberglass Threaded X							
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded (2) PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 3 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.30 ft., Weight lbs./ft. Wall thickness or gauge No.								
Casing height below land surface 0.30 ft., Weight lbs./ft. Wall thickness or gauge No.								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)								
2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open note) SCREEN OR PERFORATION OPENINGS ARE:								
1 Continuous slot 3 Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)								
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)								
1 Continuous slot 3 Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 3 ft. to 15 ft. From ft. to ft.								
			From	ft. to	ft. Fi	om ft.	to ft.	
GF	AVEL PACK	INTERVALS:	From 2	ft. to	15 ft. F1	om ft.	to ft.	
	,		From	ft. to	ft. Fr	om ft.	to ft.	
From ft. to ft. From ft. to ft. GRAVEL PACK INTERVALS: From 2 ft. to 15 ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other concrete, 0-1 ft.								
Grout Intervals From 1 ft. to 2 ft. From ft. to ft. From ft. to ft.								
What is the nearest source of possible contamination:								
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify								
2 Sewer lines 5 Cess pool 8 Sewage lagoon (11) Fuel storage 14 Abandoned water well below)								
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well								
Direction from well? ENE How many feet? ~125								
FROM	TO	LITHO	LOGIC LOG	FROM	TO	PLUGGING INT	ΓERVALS	
0			brown, with gravel					
	nes	ir surface – dec	reasing with depth,					
moderate plasticity, moist								
6	15 Lir	nestone, yellow	brown and gray					
				-				
					Flush	mount waiver from	BOW	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged								
under my jurisdiction and was completed on (mo/day/year) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 4/21/09 4/21/09								
Lunder that	nter Well Contrac	tor's License No.	This Wa			(mo/day/year)	4/21/09	
under the business name of Larsen & Associates, Inc. by (signature)								
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies 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 to WATER WELL OWNER and retain one for								
your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.								