WATER WELL RECORD	Form WWC-5	Division of Water Resources App. No.
1 LOCATION OF WATER WELL: County:	Fraction 56 1/4 5 W 1/4 W W 1/4 1/4	Section Number Township No. Range Number T R R C E W
Street/Rural Address of Well Location;	f unknown, distance & direction	Global Positioning System (GPS) information:
from nearest town or intersection: If at a from Rilly Go I Hills Ex	owner's address, check here .	Latitude:
To chilan Pl. Go Sout	h I Mile	Elevation:
2 WATER WELL OWNER: RR#, Street Address, Box #: City, State, ZIP Code :	rd STRAUSS	Collection Method:
RR#, Street Address, Box #: 994	Crokis Craft .	GPS unit (Make/Model:)
City, State, ZIP Code :	NE 66531	☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m
3 LOCATE WELL	COMPLETED WELL 100	
WITH AN "X" IN 4 DEPTH OF 6 Depth(s) Ground	COMPLETED WELL	ft.
SECTION BOX: Depth(s) Groundwater Encountered (1)		
Pump test data: Well water wasft. after hours pumping gpm		
WNWNE E EST. YIELD 20:1.gpm. Well water was		
	eter	
Domostio		r supply Dewatering Other (Specify below)
SWSE Domestic		rn & garden Monitoring well
Was a chemical/bacteriological sample submitted to Department? Yes No		
S If yes, mo/day/yr sample was submitted 1 mile Water well disinfected? Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
5 TYPE OF CASING USED: Steel PVC Other		
CASING JOINTS: Glued Clamped Welded Threaded		
Casing diameter		
Casing diameter		
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel PVC Other (Specify)		
Rease Galvanized Steel None used (open hole)		
SCREEN OR PERFORATION OPENINGS ABO		
SCREEN OR PERFORATION OPENINGS BE 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.		
SCREEN-PERFORATED INTERVALS: From		
From		
GRAVEL PACK INTERVALS: From		
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other		
		ft. to ft., From ft. toft.
What is the nearest source of possible conta	amination: Hore CleS € nes	ens Insecticide storage Other (specify below)
Sewer lines Cesspool	Sewage lagoon Fuel storag	
☐ Watertight sewer lines ☐ Seepage 1		•
Direction from well	The state of the s	TO LITHO. LOG (cont.) or PLUGGING INTERVALS
D 1 Tan Cail	I I I I I I I I I I I I I I I I I I I	10 EIIIIO. 200 (com.) W I E000IIIO II I IEI I III
1 3 Rhow Chry		
3 Thinistons		
a grown shall		
11 65 Proper Chy		
65 90 Linestone	(Matic)	
go 100 Ton Shell	(-10)	
7 CONTRACTOR'S OR LANDOWNFI	R'S CERTIFICATION: This water	er well was constructed, are reconstructed, or plugged
under my jurisdiction and was completed on (mo/day/year)		
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year)		
under the business name of		
(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 785-296-5524 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		