WATE	R WELL	RECORD	Form WWC-5		Division of Water Resources App. No. 2011 0 217							
1 LOCATION OF WATER WELL:					Section N	Number	Township N	Number	Range N	umber		
Street/Rurs			NW ¼ SE ¼ SE ¼	NW 1/4	Lobal Po	<u>;</u> citionine	T 10	S) inform	R 35	□E ⊠W		
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here \( \Boxed{\text{L}} \).  Global Positioning System (GPS) information:  Latitude: (in decimal degree of the content of th									l degrees)			
13 miles south—1 west of Levant					Longitude: (in decimal degrees)							
A VIV. A (T)	OWNER BUILT		Elevation:									
2 WATER WELL OWNER Rick Hartzfeld RR#, St. Address, Box # 1920 S 53 <sup>rd</sup> St City, State, ZIP Code Kansas City, KS 66106					Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27							
City. S	ode Kansas		Collection Method:  ☐ GPS unit (Make/Model: ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey									
	,	114115415	010,110 00100		☐ Digita	il Map/Pho	to, D Topograpi	hic Map,	☐ Land Sur	vev		
					Est. Accura	<u>acy</u> : □ <3	m, 🗆 3-5 m, 🗀	5-15 m,	□ >15 m			
	ATE WELI											
	I AN "X" I		COMPLETED WELL		170	)	ft.					
SECT	ION BOX:	' ' /	lwater Encountered (1)	<b></b>	ft	. (2)		ft. (3)	<b></b>	ft.		
	N	WELL'S STATI	C WATER LEVEL	ftft	. below lai	nd surface	measured on r	no/day/y	r	<b></b>		
		Pum	np test data: Well water	was	f	t. after	hou	rs pumpi	ng	gpm		
мүм		EST. YIELD	gpm: Well water v	was	f	t. after	hou	rs pumpi	ng	gpm		
WELL WATER TO BE USED AS: □ PO					ater supply  Geothermal  Injection well							
	Domestic    Feedlot					pply □ Dewatering □ Other (Specify below) garden □ Monitoring well						
Fsw	SW SE Irrigation ☐ Industrial ☐ Domestic-lawn &						garden					
لــا	Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No  If yes, mo/day/yr sample was submitted											
1	-		nfected? 🗵 Yes 🔲 N									
5 TYPE	OF CASING	G USED: ☐ Steel	■ PVC □ Other	Tri-road								
Casing d	JOIN 15; L liameter	▲ Glued Li Clamp	Ded ∟ Weided i In ft Diameter	Inreau ir	ea n to	ft	Diameter		in to	ft		
Casing h	CASING JOINTS:  Glued  Clamped  Welded  Threaded Casing diameter  4.5 in. to  130 ft., Diameter  in. to  ft., Diameter  in. to  ft. Casing height above land surface  18  in., Weight  2.38 lbs./ft. Wall thickness or gauge No.  .248											
TYPE OF	SCREEN OF	R PERFORATION MA	ATERIAL:					86				
	☐ Steel ☐ Stainless Steel ☑ PVC ☐ Other (Specify)											
	☐ Brass ☐ Galvanized Steel ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:											
□ Co	ntinuous Slo	t	Gauze wrapped	Torch cu	ıt 🗆	1 Drilled I	noles 🗆 N	one (ope:	n hole)			
☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☒ Saw cut ☐ Other (specify												
SCREEN-I	PERFORATI	ED INTERVALS:	From 1.30	ff. to	170 ft., From ft. to				0	ft.		
CP.	AMEL DACI	Z DITEDVALO.	ft. to	ft., From         ft. to         ft.           170         ft., From         ft. to         ft.           ft., From         ft. to         ft.								
UN	AVELTACI	K INTERVALS:	From 40	ft to	1/0	ft Fr	0 <b>m</b>	II. u	) ^	II.		
4 CPOI	TT MATEDI	IAI. D Nost came	Coment arout	₩		Cthor	JIII					
Grout Inter	rvals Fr	rom 0 ft. to	nt Cement grout 20 ft. From	மே மள ft.	to	U Other ft.	From		ft to	ft.		
What is the	e nearest sou	rce of possible contami	ination:				110111		. II, W			
☐ Sep	ptic tank	☐ Lateral lir	nes 🗆 Pit privy 🗆	Livestoc			ticide storage		ther (specif	fy below)		
	wer lines	☐ Cesspool er lines ☐ Seepage p	☐ Sewage lagoon ☐ Sit ☐ Feedvard ☐				doned water we					
	n from well	er mes 🗀 Seepage p	m 🗀 reedyard 🗀	Fertilize Distance	r storage from well		ell/gas well	Non				
FROM	ТО	LITUO	LOGIC LOG	FROM			D. LOG (cont.)			CEDVALC		
0	2	Surface	LOGIC LOG	145	155		and & sandy					
2	13	Loess		155	163		some med s		A W/Clay S	ou no		
13	23	Clay		163	180		ochre					
23	41	Clay w/caliche strl										
41	54		w/clay & caliche strks									
54 63	63 82	Clay & caliche w/s Clay w/caliche strl										
82		Fine sand w/clay &										
103			clay mix w/clay strks									
127		Clay w/fine sand s								-		
7 CONT	RACTOR'	S OR LANDOWN	ER'S CERTIFICATIO	N: This v								
under my jurisdiction and was completed on (mo/day/year) 5-11-11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 . This Water Well Record y completed on (mo/day/year) 5-20 - 11												
		e of <b>Woofter Pum</b>		by (signat			floof to		5-10			
			• • • • • • • • • • • • • • • • • • • •		blue pists	sy f	Deportment of II	Coalth and	Environmen	t Burnon of		
INSTRUCTIONS: Please fill in blanks and check the correct answers. Send three copies (white, blue, pirk) to Kansas Department of Health and Environment, Bureau o 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. Incl.	ude fee of \$5.00 for each	constructed well. Visit us at ht	tp://www.k	dheks.gov/	waterwell/i	.ndex.html.					

Check: ☐ White Copy, ☐ Blue Copy, ☐ Pink Copy