

WATER WELL R ☐ Original Record ☐		** ** C-3	1102	1		on of Water			Well ID		
1 LOCATION OF W	<u> </u>	e in Well Use Fraction				ces App. No on Number		ownshin Numb		aga Numbar	
County:	AIEK WELL:	1/4 1/4	1/4	1/4	secu	on Number	1	ownship Numb T S	R R	nge Number □ E □ W	
·					Duro1	I Addross v	vhoro				
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:											
Address:			'	incetion ne	JIII IICa	ilest town of	incrace	tion). If at owner	s address,	check here.	
Address:											
City:	State:	ZIP:				1					
3 LOCATE WELL	4 DEPTH OF COM	PLETED WE	LL:		ft	5 Latitu	de.			(decimal degrees)	
WITH "X" IN	Depth(s) Groundwater I				Dry Well Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:						
SECTION BOX:	2) ft. 3	,									
11	WELL'S STATIC WA	TER LEVEL:		ft.						111111111111111111111111111111111111111	
	☐ below land surface,			GPS (unit make/model:)							
NW NE		above land surface, measured on (mo-day-yr				(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well w				☐ Land Survey ☐ To						
W E	after hours	s pumping vater was				☐ Online Mapper:					
SW XE	after hours					6 Elevation:ft. Ground Level TOC					
	Estimated Yield:										
S	Bore Hole Diameter:			. ft. and	. and Source: Land Survey GPS [
mile	I .	in. to		. ft.			☐ Ot	her	•••••		
7 WELL WATER TO											
1. Domestic:		ter Supply: well						Water Supply: 16			
Household		g: how many we									
☐ Lawn & Garden ☐ Livestock		echarge: well ID						Uncased (
2. Irrigation		g: well ID al Remediation: v						how many bores			
3. ☐ Feedlot	☐ Air Sparge				•••			p Surface Di			
4. ☐ Industrial	☐ Recovery		_					ecify):			
Was a chemical/bacter				Zes □ N	lo I			e was submitte			
Water well disinfected?		ntica to RDIIL	·· ш ·	1 C3	0 1	1 yes, date	sampi	e was sabimite	· · · · · · · · · · · · · · · · · · ·		
8 TYPE OF CASING		C 🗆 Other		CA	SINC	G IOINTS:	□Gl	ued □ Clampeo	l □ Welde	d □ Threaded	
Casing diameter											
Casing height above land s											
TYPE OF SCREEN OR	PERFORATION MA	TERIAL:									
	less Steel					☐ Othe	er (Spe	cify)			
	anized Steel		None us	ed (open h	nole)						
SCREEN OR PERFOR											
						lled Holes ne (Open Ho		ner (Specify)	• • • • • • • • • • • • • • • • • • • •		
	☐ Key Punched ☐ W							ft From	ft to	ft	
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From										, • • • • • • • • • • • • • • • • • • •	
Nearest source of possible		,				,					
☐ Septic Tank	□ Lateral Line				☐ Li	vestock Pen	ıs	☐ Insection	cide Storage	;	
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well											
☐ Watertight Sewer Lin					☐ Fe	ertilizer Stor	age	☐ Oil We	ll/Gas Well		
☐ Other (Specify)											
10 FROM TO	LITHOLOG		om we	FROM						G INTERVALS	
TO TROM TO	LITHOLOG	JIC LOG		TROM	L	10	LITTIC	. LOG (cont.) of	LUGGIN	UINTERVALS	
				Notes:	ı I						
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFICA	TION	: This wa	ater v	well was	cons	tructed, 🔲 reco	onstructed,	or plugged	
under my jurisdiction ar	d was completed on (m	no-day-year)		aı	nd thi	is record is	true t	o the best of m	y knowled	ge and belief.	
Kansas Water Well Con	tractor's License No	Th	ıs Wat	er Well F	Kecor	d was com	pleted	ı on (mo-day-y	ear)		
under the business name	Send one conv to WATER W	ELL OWNER and	retain o	ne for your	record	s. Fee of \$5	00 for a	ach constructed we			
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.											

Form	WWC5			
Contractor	Woofter Pump & Well, Inc.			
Well Owner				
Doc ID	1102053			

Litholgy

From	То	LithologicLog
0	2	surface
2	15	loess
15	42	clay
42	45	med sand
45	50	caliche
50	57	med sand & gravel
57	72	clay & caliche
72	97	med sand & gravel
97	98	caliche hard
98	100	med sand
100	101	caliche
101	106	med sand
106	130	clay w/caliche
130	136	meed sand clay lenses
136	155	fine sand
155	170	clay caliche & fine sand lenses
170	177	fine sand
177	178	caliche
178	187	clay
187	192	med sand
192	197	ochre shale