| WATER WELL RECORD | | Form W | WC-5 | Division of Wate | r Resources App. No |), | | |
|---|---|---------------------------------|--|---|---------------------|-------------------------------|--|--|
| 1 LOCATION OF WATER WELL: | | Fraction | | Section Number | | | | |
| County: Ellis | | 1/4 1/4 5/2 | 14NW4 | 11 | | R /9 □E ⊠W | | |
| Street/Rural Address of Well Location; if unknown, o | | | & direction | Global Positioning | | | | |
| from nearest town or in | | Latitude: (in decimal degrees) | | | | | | |
| TOTAL MODEL OF THE OZ M | . 1 | Longitude: (in decimal degrees) | | | | | | |
| 2237 South View - Hays, Ks. | | | | Elevation: (in decimal degrees) | | | | |
| 003/00 | ads I south view viays, 18. | | | | | Datum: WGS 84, NAD 83, NAD 27 | | |
| 2 WATER WELL OW | GRUDOS, | Collection Method: | | | | | | |
| RR#, Street Address, Box #: 1804 Walnut | | | | GPS unit (Make/Model:) | | | | |
| City, State, ZIP Code : 1/2 /2/27 | | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | | |
| City, State, ZIP Code: Harm Ellis, Ks 47637 Digital Map/Photo, Topographic Map, Lar Est. Accuracy: <3 m, 3-5 m, 5-15 m, > | | | | | | | | |
| 3 LOCATE WELL | | | | | | | | |
| WITH AN "X" IN | HAN "X" IN 4 DEPTH OF COMPLETED WELL | | | | | | | |
| SECTION BOX: | | | | | | | | |
| N | WELL'S STATIC WATER LEVEL 31 | | | | | | | |
| | Pump test data: Well water wasft. after hours pumping gpm | | | | | | | |
| EST. YIELD. 20.7 gpm. Well water was | | | | | | | | |
| W | | | | | | at. | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | |
| SWSE Domestic Feedlot Oil field water supply Dewatering Other (Specify below) | | | | | | | | |
| | | | | | | | | |
| 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 □ No | | | | | | | | |
| • | | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other Other | | | | | | | | |
| CASING JOINTS: A Glued Clamped Welded Threaded | | | | | | | | |
| Casing diameter | | | | | | | | |
| Casing height above land surface | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☑ PVC ☐ Other (Specify) | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | |
| 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 | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From. 6.3 | | | | | | | | |
| From ft. to ft. From ft. to ft. | | | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | |
| Grout Intervals: From | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | |
| Septic tank | | _ | Livestock p | ens 🔲 Insecticide | storage | er (specify below) | | |
| Sewer lines | | Fuel storage | | | w (appear) | | | |
| Sewer lines | | | | | | | | |
| Direction from well EAST Distance from well .2.0. | | | | | | | | |
| FROM TO | LITHOLOG | IC LOG | FROM | | | GGING INTERVALS | | |
| 0 2 700 | Sail | | | | | | | |
| 2 26 CIA | | | | | | | | |
| 26 41 0/4 | V + 5000 | D CFINE) | | | | | | |
| 41 48 FIN | E - 2 - 2 - | | 1 | | | | | |
| 48 56 SAN | D & GRA | .25 | | | • | | | |
| | V & GRA | | | | - | | | |
| 56 60 CIA | | | | | | | | |
| 60 65 SHF | tlt | | | | | | | |
| | | | - | | | | | |
| | | | - | | | | | |
| A CONTENT OF THE AND OWNERS OF PRINCIPAL OF THE STATE OF | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged | | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) 3/2/e// and this record is true to the best of my knowledge and belief. | | | | | | | | |
| Kansas Water Well Contractor's License No. 4.7.1 This Water Well Record was completed on (mo/day/year) | | | | | | | | |
| under the business name of how the state with well SERU by (signature). | | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topicka, Kansas 66612-1367. | | | | | | | | |
| Telephone 785-296-5522 Sen | d one copy to WAT | ER WELL OWNER and | retain one for w | gy occuon, 1000 SW Jac our records Include fee | of \$5.00 for each | opeka, Kansas 66612-1367. | | |
| Telephone 785-296-5522. 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 | | | | | | | | |