LOCATION OF WATER WELL Fraction Fracti	WATER WELL RECORD		Form W	WC-5	D	Division of Water Resources App. No.				
County Wallace	1 LOCATION OF WATER WELL:		Fraction							
Street/Rural Address of Well Location, if unknown, distance & direction from neuers town or intersection. If all owner's address, check here Latitude:			1/4 SE 1/4 SE	1/4 SE 1/4 SE 1/4 SE 1/4						
From nearest town or intersection: If st owner's address, check here Latitude:						al Positioning		-d		
428 from south line & 262 from east line										
Section Methods Street Address, Box # 5002 Rd 29 Gelection Method Gill State, Lift Code Wallace, KS 67761 Digital MapPhote Topographic Mice, Land Survey Barkey Land Survey Barkey Land Survey Land Surv	1	**************************************								
No. Name Section S	420 HOIR SOUTH MIC & 202 HOIR CAST MIC					Elevation:				
Callestion Methods Callest					Datu	m: WGS 8	4 □ NAD 83 □	 1 NAD 27		
City, State, LP Code							,, <u>L</u>	1 11/10 27		
Section No.										
SECTION WILL WITH AN "X" IN SECTION WILL SO Depth(s) Groundwater Encountered (1) R. (2) R. (3) ft.	City, Sta	ate, ZIP Code : Walla	ce. KS 67761	KS 67761						
SECTION ONE SECTION ONE Purple of Community of the					Est. A	Accuracy: <a>C	3 m, □ 3-5 m, □]5-15 m,		
Depth(s) (Foundwater Encountered 1) ft (2) ft (3) ft (3) ft (4) ft	3 LOCATE WELL									
Pump test data: Well water was. ft. after hours pumping gpm bore flole Diameter 8.5 in to 100 ft. and in to ft.	1	AN "X" IN 4 DEPTH OF COMPLETED WELL 50 ft.								
Pump test data: Well water was. ft. after hours pumping. gpm well water was. ft. after hours pumping. gpm well water was. ft. after hours pumping. gpm Bore Hole Diameter 8.5 in to 10 ft. ft. hours pumping. gpm Bore Hole Diameter 8.5 in to 10 ft. ft. hours pumping. gpm Bore Hole Diameter 8.5 in to 10 ft. ft. hours pumping. gpm Bore Hole Diameter 8.5 in to 10 ft. ft. hours pumping. gpm Geothermal Injection well Was a chemical/houcirchological sample submitted to Department? Was a chemical/hourirchologica	1	ON BOX: Depth(s) Groundwater Encountered (1)								
STYPE OF CASING USES See Feedor Domestic Feedor Off feed water sumply Geothermal Injection well Well water with distributed Off Feedor Off feed water sumply Geothermal Injection well Off was a chemical Nater along Off Feedor Off feed water sumply Geothermal Injection well Off was a chemical Nater along Off Feedor Off feed water sumply Geothermal Injection well Was a chemical Nater along Off Feedor Off feed water sumply Geothermal Off Feedor Off Feed	-	WELL'S STATIC WATER LEVEL. 4!ft. below land surface measured on mo/day/yr								
Bore Hole Dameter 9.5 in to .	Pump test data: Well water wasft. after									
WELL WATER TO BE USED AS:	NW NE EST. YIELDgpm. Well water was									
SW SW SW SW SW SW SW SW	W E Bore Hole Diameter 8.5in. to									
Irrigation Industrial Domestic-lawn & garden Monitoring well										
Was a chemical/bacteriological sample submitted to Department? Yes No										
Was a chemical protection of the sample was submitted. Yes No	Irrigation Industrial Domestic-lawn & garden Monitoring well									
Water well disinfected? Yes No	Was a chemical/bacteriological sample submitted to Department? Yes V No									
Strype of Casing Steel Steel PVC Other	S If yes, mo/day/yr sample was submitted									
CASING JOINTS:	water well distincted: W 1es [] No									
CASING JOINTS:	5 TYPE OF CASING USED: Steel PVC Cher									
Casing diameter 4.5. In. to 59. ft. Diameter In. to ft. Casing height above land surface 20. in. Weight 2.5. Ibs/ft. Wall thickness or gauge No. 0.248. TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel Stainless Steel Mone used (open hole) SCREEN OR PERFORATION OPENINGS ARE: Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole) SCREEN OR PERFORATION OPENINGS ARE: Continuous slot Mill slot Gauze wrapped Saw cut Other (specify)	CASING JOINTS: ▼1 Glued □ Clamped □ Welded □ Threaded									
Casing height above land surface. Sy in, Weight 4.5 lbs./ft, Wall thickness or gauge No. 9.248 TYPE OF SCREEN OR PERFORATION MATERIAL: Steel	Casing diameter 4.5 in to 60 ft Diameter in to ft Diameter in to									
SCREEN OR PERFORATION MATERIAL:	Casing height above land surface 20 in Weight 2.5 lbs /ft Wall thickness or gauge No. 0.248									
Steel Stainless State Communication Steel Stainless State Communication	TYPE OF SCREEN OR PERFORATION MATERIAL:									
Brass Galvanized Steel None used (open hole)										
Continuous slot Mill slot Gauze wrapped Torch cut Other (specify) Continuous slot Mill slot Wire wrapped Wire wrapped ScreEN-PERFORATED INTERVALS: From 40. ft. to 60. ft. From ft. to ft. From ft. ft. From ft. to ft. From ft. to ft. From ft. ft. From ft. to ft. From ft. to ft. From ft. ft. ft. From ft. ft. From ft. ft. ft. From ft. ft. From ft. ft. ft. From ft. ft. ft. From ft. ft. From ft. ft. ft. From ft. ft. ft. ft. ft. ft. From ft. ft. ft. ft. ft. ft. ft. ft. ft.										
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)	SCREEN OR PERFORATION OPENINGS ARE:									
SCREEN-PERFORATED INTERVALS: From. 40. ft. to 60. ft., From ft. to ft. From										
From. ft. to	Louvered shutter Key punched Wire wrapped Saw cut Other (specify)									
GRAVEL PACK INTERVALS: From .25	SCREEN-PERFORATED INTERVALS: From 40 ft. to 60 ft., From ft. to ft.									
From ft. to ft. GROUT MATERIAL: Neat cement Cement grout Intervals: From ft. to ft. From ft. From ft. From ft.	From ft. to ft., From ft. to ft.									
Contractor's Cont	GRAVEL PACK INTERVALS: From 49 ft. to 60					ft., From	ft.	to ft.		
Contractor's Cont	From									
What is the nearest source of possible contamination: Septic tank	6 GROUT	MATERIAL: Neat cer	ment Cement grou	t 🖊 Bento	onite [Other				
Septic tank Casspool Sewage lagoon Full storage Abandoned water well Abandoned Abandoned water well Abandoned	Grout Intervals: From ft. to ft., From ft. to ft., From ft. ft.									
Sewer lines Cesspool Sewage lagoon Freel storage Abandoned water well Direction from well Distance from well FROM TO	What is the nearest source of possible contamination:									
Watertight sewer lines Seepage pit Feedyard Distance from well										
Direction from well FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 0 2 Surface 2 15 Loess 15 30 Clay 30 51 Fine to Med sand with gravel 51 60 Black shale 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was										
FROM TO LITHOLOGIC LOG FROM TO LITHOLOG (cont.) or PLUGGING INTERVALS 0 2 Surface 2 15 Loess 15 30 Clay 30 51 Fine to Med sand with gravel 51 60 Black shale 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, or plugged under my jurisdiction and was completed on (mo/day/year) 6/11/12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 838 This Water Well Record was completed on (mo/day/year) 7/10/12 by (signature) INSTRUCTIONS: Use ty pewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Depar tment of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. 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. Vi sit us at										
2	EDOM T	Thom wen	VOTO I OO							
2 15 Loess 15 30 Clay 30 51 Fine to Med sand with gravel 51 60 Black shale 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) 6/11/12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 838 This Water Well Record was completed on (mo/day/year) 7/10/12 under the business name of D&R Pump Service, LLC by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Depart ment of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 6612-1367. 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. Vi sit us at			OR LOG	FROM	10	LITHO. LO	JG (cont.) or PLU	JGGING INTERVALS		
15 30 Clay 30 51 Fine to Med sand with gravel 51 60 Black shale 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 8 constructed, or □ plugged under my jurisdiction and was completed on (mo/day/year) 6/11/12 and this record is true to the best of my knowledge and belief. 8 Kansas Water Well Contractor's License No. 838 This Water Well Record was completed on (mo/day/year) 7/10/12 under the business name of □ D&R Pump Service, LLC by (signature) 1 INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. 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. Vi sit us at					***************************************					
51 Fine to Med sand with gravel			The three days are an appearance of the same and the same					***************************************		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 838 This Water Well Record was completed on (mo/day/year) 7/10/12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 838 This Water Well Record was completed on (mo/day/year) 7/10/12 under the business name of .D&R Pump Service, LLC			***************************************							
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) .6/11/12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No838 This Water Well Record was completed on (mo/day/year) .7/10/12 under the business name of .D&R Pump Service, LLC by (signature). INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. 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. Vi sit us at			h gravel							
under my jurisdiction and was completed on (mo/day/year) .6/11/12	51 60	Black shale								
under my jurisdiction and was completed on (mo/day/year) .6/11/12										
under my jurisdiction and was completed on (mo/day/year) .6/11/12								4000		
under my jurisdiction and was completed on (mo/day/year) .6/11/12										
under my jurisdiction and was completed on (mo/day/year) .6/11/12										
under my jurisdiction and was completed on (mo/day/year) .6/11/12										
under my jurisdiction and was completed on (mo/day/year) .6/11/12	7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was [7] constructed. reconstructed. or named and named and named are reconstructed.									
Kansas Water Well Contractor's License No. 838. This Water Well Record was completed on (mo/day/year) 7/10/12 under the business name of D&R Pump Service, LLC by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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, Topeka, Kansas 666 12-1367. 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. Vi sit us at	under my jurisdiction and was completed on (mo/day/year) 6/11/12 and this record is true to the best of my knowledge and belief									
under the business name of .D&R Pump Service, LLC by (signature). INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. 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. Vi sit us at	Kansas Water Well Contractor's License No. 838 This Water Well Record was completed on (mo/day/year) 7/10/12									
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 Depar tment of Health and E nvironment, 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. Vi sit us at	under the bu	isiness name of D&R Pum	p Service, LLC		by (signature)	1. 18 11	Commence of the commence of th		
(white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. 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. Vi sit us at	INSTRUCTION	ONS: Use ty pewriter or ball point p	en. PLEASE PRESS FIRML	Y and PRINT of	early Pla	eace fill in blanke	and check the corre	ot angreen Sand three conice		
http://www.kdheks.gov/waterwell/index.html.	(white, blue, p	oink) to Kansas Depar tment of Heal	th and E nvironment, Bureau	of Water, Geo	logy Secti	ion, 1000 SW Jac	ckson St. Suite 420	Toneka Kansas 666 12-1367		

KSA 82a-1212

Check: White Copy, Blue Copy, Pink Copy