WATER WELL R		Form WWC-5		ision of Wate ources App. N		Well ID	
1 LOCATION OF W	ATER WELI	L: Fraction	Sec	tion Number	r Township Numb	er Range Number	
County: Off o	ast Name:	NE 1/4 SW1/4 SW1/4	Street or Ru	34	T 12 S	(if unknown distance and	
Business: Koch Kemediation & Cov. Dervices direction from nearest town or intersection): If at owner's address, check here:							
Address: 4111 E. 37th St. N Address: 4111 E. 37th St. N							
City: W: Lika State: KS ZIP: 67 220 Culver KS  3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 33 ft. 5 Latitude: 38.9665 (decimal degrees)							
WITH "X" IN				5 Latitu	ide: 30.7665	(decimal degrees)	
SECTION BOX:	Depth(s) Groundwater Encountered: 1)				5 Latitude: 38.9665 Longitude: 75.979999999999999999999999999999999999		
	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:		
NW NE		nd surface, measured on (mo-day- nd surface, measured on (mo-day-		<b>X</b> GI	M GPS (unit make/model: Garmin e+rck) (WAAS enabled? M Yes □ No)		
	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map		
W E	Well water was ft.				☐ Online Mapper:		
SW SE	after			6 Elevat	6 Elevation: 1260 ft. M Ground Level □ TOC		
S	Bore Hole Diameter:				Source: Land Survey GPS Topographic Map		
1 mile  in. to ft. Uother							
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID							
☐ Household	6. ☐ Dewatering: how many wells?			11. Test Hole: well ID			
☐ Lawn & Garden ☐ Livestock	7. Aquifer Recharge: well ID Cased C						
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop		
3. ☐ Feedlot 4. ☐ Industrial		Air Sparge ☐ Soil Vapor I Recovery ☐ Injection	extraction	6) Op 13. ☐ Otl	her (specify):	scharge inj. of water	
Was a chemical/bacteriological sample submitted to KDHE?   Yes No If yes, date sample was submitted:							
Water well disinfected? ☐ Yes No							
8 TYPE OF CASING USED: Steel PVC Other							
Casing height above land surface							
TYPE OF SCREEN OR PERFORATION MATERIAL:  ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)							
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:  Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)							
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)							
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)  SCREEN-PERFORATED INTERVALS: From							
9 GROUT MATERIAL: Neat cement, Cement grout M Bentonite Other							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft., From ft. to ft., From ft.							
Nearest source of possible contamination:  □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage							
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well							
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)							
Direction from well?		Distance from we	:11?				
10 FROM TO   15	Lean cl	THOLOGIC LOG 4 →	FROM	TO	LITHO. LOG (cont.) or	PLUGGING INTERVALS	
15 28	Silty Sa	nd					
28 33	silt with	Sand					
			-				
			Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or plugged under my jurisdiction and was completed on (mo-day-year)							
Kansas Water Well Contractor's License No							
under the business name	of Below	J O. round J. G. t. t. R. R	. <b> </b>	mature A	NX		
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.							
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015							

