WATE	R WEI	LL REC	CORD	Form WWC-5 Division of Water Resources App. No.					lo. L	
1 LOCATION OF WATER WELL: County: ELLIS			Fraction SE 1/4 SE 1/4 SW	V 1/4 1/4		ion Number 20	Township No. T 13 S	Range Number R 18 □E ☑W		
Stree	t/Rural A	Address o	f Well Location;	f unknown, distance &	Glob	al Positioning	System (GPS) is	nformation:		
from nearest town or intersection: If at owner's address, check here <b>[7]</b> .							Latitude: (in decimal degrees)			
							Longitude: (in decimal degrees)			
							Elevation:			
A WATER WELL OWNER.							<u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
2 WATER WELL OWNER: KEVIN SWAYNE							Collection Method:			
RR#, Street Address, Box #: 4124 COVENANT DR City, State, ZIP Code : HAYS KS 67601							GPS unit (Make/Model:)			
City,	, State, Z	LIP Code	: HAYS K	S 67601			☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m			
3 LOCATE WELL										
	H AN "X		4 DEPTH OF	COMPLETED WEL	ட 70		ft.			
	FION BO		Depth(s) Ground	water Encountered	(1).55	ft	. (2)	ft.	(3) ft.	
	N		WELL'S STATI	C WATER LEVEL	55f	ft. below land surface measured on mo/day/yr. 06-14-11				
	Pump test data: Well water wasft. after								pinggpm	
l N	v   N		EST. YIELD. 30	lgpm. Well wate	r was	f	t. after	hours pum	pinggpm	
w i	1	E	Bore Hole Diam	eter 10						
		$\vdash$		TO BE USED AS:					Injection well	
_ cu	v   s	E	□ Domestic	☐ Feedlot ☐	Oil field was	ter supp	ly 🗌 De	watering $\Box$	Other (Specify below)	
1 1	X	15	☐ Irrigation							
	Was a chemical/bacteriological sample submitted to Department? Yes V 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										
CASING JOINTS: Glued Clamped Welded Threaded										
Casing diameter .5 in. to .70 ft., Diameter in. to ft., Diameter in. to ft.										
Casing height above land surface. 18 in., Weight .160 lbs./ft., Wall thickness or gauge No.										
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: From70 ft. to30 ft., From ft. to ft.										
From										
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From 30 ft. to 0 ft., From ft. to ft. ft. ft.										
What is the nearest source of possible contamination:  ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)										
	Sewer lin		☐ Cesspool		☐ Fuel stora		Abandoned	storage ∐ Our	ier (specify below)	
Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well										
									•••••	
FROM	TO		LITHOLOG		FROM	TO			GGING INTERVALS	
0	10	SURFA	CE CLAY			1				
10	30		GRAY CLAY							
30	40		W CLAY & WHI	TE LIMESTON			1			
40	60		TONE ROCK &		† †					
60	70	MED S					1			
70	72	BLUE S			<del>                                     </del>			A.1.		
					<del>                                     </del>					
							<b>†</b>			
					<del>                                     </del>		<u> </u>			
					<del>                                     </del>					
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) .06-14-11 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No444 This Water Well Record was completed on (mo/day/year) .06-14-11.										
under the	e busines	ss name o	ANDY ANDE	RSON DRILLING	awi well h	hu /	rionatura V	In (inpruayrycar)	dusen le	
INSTRUC	CTIONS:	Use typewi	iter or ball point pen.	PLEASE PRESS FIRMLY	and PRINT clo	earty. Ple	ase fill in blanks	and check the correct	t answers Send three conies	
(white, blu	ue, pink) to	o Kansas D	epartment of Health	and Environment, Bureau	of Water, Geol-	ogy Section	on, 1000 SW Jac	kson St / Suite 420	Toneka Kansas 66612-1367	
Telephone	785-296-5	5522. Sen	d one copy to WATI	ER WELL OWNER and r	retain one for	our reco	rds. Include/ <u>fee</u>	of \$5.00 for each c	onstructed well. Visit us at	
http://www.kdheks.gov/waterwell/index.html.  KSA 82a-1212  Check: White Copy, Blue Copy, Pink Copy										
MOM 028-	1212					C	neck: L∕MWh	пе Сору, 📙 ВІ	ue Copy, Pink Copy	