1 LO	CATION OF V	WATER WEL	L:	Fraction			Section N	lumber	Township	Number	Range Nu		
	nty: E11			nw ¼		NW 1/4	2		T 1/28	s 14	R 16	X _{E/W}	
	Distance and direction from nearest town or cit			street address of well if			Global Positioning Systems (decimal degrees, min. of 4 digits)						
loca	located within city? 1268 Walker Ave, In town						Latitude:						
							Longitude:						
	ATER WELL		Tom Drei				Elevation	n:					
RR#, St. Address, Box # : 1268 Walker Ave City, State, ZIP Code : Walker, KS 67674							Elevation: Datum:						
Cit	y, State, ZIP Co	KS 67674			Data Collection Method:								
3 LO	CATE WELL'	S 4 DEPTH	OF COMPL	ETED WE	ELL	29		ft.					
	CATION												
	ΓΗ AN "X" IN	Depth(s)	Groundwater I	Encountere	ed (1)		ft.	(2)	ft	. (3)		ft.	
SEC	CTION BOX:	WELL'S	Groundwater I STATIC WAT	TER LEVI	EL	.2.7 ft.	below lar	nd surface	measured	on mo/day	/yr1.1 / .2!	0./.0.6	
	N	Pu	ımp test data:	Well wa	ter was		ft. after		hours p	umping	• 	. gpm	
		Est. Yieldgpm: Well water wasft. after hours pumping gpr										gpm	
x	W NE	WELL W	WELL WATER TO BE USED AS. 5 Public water supply 8 Air conditioning 11 Injection well										
w		E 1 Domest									er (Specify		
		2 Irrigation	2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well										
s	W SE	SE											
		Was a chemical/bacteriological sample submitted to Department? Yes NoX; If yes, mo/day/yrs											
1	·	Sample w	Sample was submitted										
S													
5 TYP	E OF CASING				8 Conc	rete tile		CASINO	JOINTS:	Glued	Clampe	d	
		RMP (SR)	6 Asbestos-C	Cement	9 Other	r (specify	below)			Welded			
2	PVC 4 A	ABS _	7 Fiberglass							Threaded.			
Blank	PVC 4 A casing diameter	· in	to29	ft., Dia	meter	iı	n. to	ft.,	Diameter	i	n. to	ft.	
Casing	height above la	and surface		in., weig	ght	l	bs./ft.	Wall thic	kness or gu	age No			
	OF SCREEN O												
		Stainless Steel	5 Fiberg	lass	7 PVC	9 A	.BS		11 Other (Specify).		• • • • • • •	
		Galvanized Ste	al 6 Concre	ete tile	8 RM (SR	(a) 10 A	Asbestos-C	ement	12 None u	sed (open	hole)		
SCREEN OR PERFORATION OPENINGS ARE:													
1 Continuous slot 3 Mill slot 5. Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)													
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)													
SCREEN-PERFORATED INTERVALS: From													
From													
	GRAVEL PA	CKINIERVA									· · · · · · · · · · · · · · · · · · ·		
			r roiii	• • • • • • • • • • • • • • • • • • • •	11. 10 .	• • • • • • • • • • • • • • • • • • • •	Il.,	rioni	• • • • • • • • • • • • • • • • • • • •	11. 10		It.	
6 GRO	DUT MATERI	AL: 1 Neat	cement 2 C	ement gro	ut 3 Be	ntonite	4 Other						
		From		_									
What is	s the nearest sou				,				,		++.		
	Septic tank		ateral lines 7		1	10 Livesto	ck pens	13 Inse	ecticide Sto	rage	l 6 Other (sp	ecify	
2	Sewer lines			Sewage 1		11 Fuel sto			andoned wa	_	below)	•	
3	Watertight sev	ver lines 6 S	eepage pit	Feedyard	l 1	2 Fertiliz	er Storage	15 Oil	wll/gas we	11 .			
Directi	on from well? .						y feet?						
FROM			THOLOGIC			FROM	ТО		PLUGG	ING INTE	RVALS		
						0	4	Dir					
						4	5		e plug				
					·	5	25		1 dirt				
						25	26	Ho1	e plug				
					- 11 - 11	26	29		vel				
			7										
						 	†						
7 CON	TRACTOR'S	OR LANDON	WNER'S CE	RTIFICA	TION: 7	This water	well was	(1) const	ructed. (2)	reconstruc	ted, or (3)	olugged	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)													
Kansas Water Well Contractor's License No. 0199 This Water Well Record was completed on (mo/day/year)													
Under the business name Warst Water Well Drilling & Sergy (signature) nc													
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment. Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-													
copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.													

Form WWC-5

Division of Water Resources; App. No.

WATER WELL RECORD