| WATER WELL RE | CORD | Form W | WC-5 | Division of Wate | r Resources App. No | _{),} L | Military and the second section of the section of the second section of the section o | |
|---|--|---|------------------|---|--|-------------------|--|--|
| 1 LOCATION OF WA | LIND | Fraction NE14NE1/4SW | 1 1/4 NW 1/4 | Section Number | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | Range Number | | |
| Street/Rural Address of | of Well Location; | if unknown, distance & | direction | Global Positioning | | | | |
| from nearest town or intersection: If at owner's address, check here . GHY BALLOW DE. | | | | Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: | | | | |
| | | | | <u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27 | | | | |
| 2 WATER WELL OWNER: CHAD KASSEM RR#, Street Address, Box #: City, State, ZIP Code 3 LOCATE WELL 2 WATER WELL OWNER: CHAD KASSEM GHY BARLOW DE. SALINA, YS Ce1401 | | | | Collection Method: GPS unit (Make/Model:) | | | | |
| City, State, ZIP Code | SAL | 1NA X 6 4 | 1401 | | oto, 🗌 Topographi | c Map, 🔲 Land S | Survey | |
| 3 LOCATE WELL WITH AN "X" IN | | | i)). | 7) | | | | |
| SECTION BOX: | Depth(s) Ground | lwater Encountered | (1)3 <i>O</i> | ft. (2) | ft. (| 3) | ft | |
| N N | ## A DEPTH OF COMPLETED WELL | | | | | | | |
| NW SET YIELDgpm. Well water was ft. after | | | | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | |
| SWSE Domestic Feedlot Oil field water supply Dewatering Other (Specify below) Irrigation Industrial Domestic-lawn & garden Monitoring well | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No | | | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | | | |
| Water well disinfected? | | | | | | | | |
| CASING JOINTS: Glued | | | | | | | | |
| CASING JOINTS: Glued Clamped Welded Threaded Casing diameter ft., Diameter ft., Diameter ft., Diameter ft., Diameter ft. | | | | | | | | |
| Casing height above land surface | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ Other (Specify) | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: Continuous slot Mill slot D Gauze wrapped Torch cut Drilled holes None (open hole) | | | | | | | | |
| ☐ Continuous slot Mill slot O Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify) SCREEN-PERFORATED INTERVALS: From | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | |
| From | | | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | |
| Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below) | | | | | | | | |
| Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well | | | | | | | | |
| Direction from well | DOETH | DEST | | rom well | | | | |
| FROM TO | LITHOLOG | | FROM | TO LITHO. LO | OG (cont.) <u>or</u> PLU | GGING INTE | RVALS | |
| O I TO | | BLACK V FIRM | | | | | | |
| 15 22 Chi | | LIY 9 SANDY | | 160 | AUEL PA | CKI | | |
| 72 81 SAI | NO TAN F | NE WITH | | | -12 JANA | | | |
| | | EK GRAVEL | | | | *** | W | |
| 81 SH | ALR | | | | | | | |
| | PRODUCTION OF THE PRODUCTION O | | | | | | | |
| | | W-D- WANT WANT OF THE PARTY OF | | | | | | |
| 7 CONTRACTOR'S O | R LANDOWNEI | R'S CERTIFICATIO | N: This water | r well was 🔽 constr | ructed. Treconstr | ucted, or Dinh | 199ed | |
| 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) 101610 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 3 This Water Well Record was completed on (mo/day/year) 10 | | | | | | | | |
| Kansas Water Well Contractor's License No. 3.1. This Water Well Record was completed on (mo/day/rear) | | | | | | | | |
| 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, Geolog | gy Section, 1000 SW Ja | ckson St., Suite 420, | Topeka, Kansas 66 | 6612-1367. | |
| 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 | | | | | | | | |