WATER WELL RECORD Form WWC-5	Division of Water Resources App. No.
1 LOCATION OF WATER WELL: Fraction)	Section Number Township No. Range Number
1 LOCATION OF WATER WELL: Fraction SW1/4 NW1/4 SW1/4 SK1/4	23 T /4 S R 3 □E XW
Street/Rural Address of Well Location; if unknown, distance & direction	Global Positioning System (GPS) information:
from nearest town or intersection: If at owner's address, check here	Latitude:
1120 DOVER DE.	Elevation: (in decimal degrees)
770,0 0070	Datum: WGS 84, NAD 83, NAD 27
2 WATER WELL OWNER: PHIL CLOSE RR#, Street Address, Box #: 1120 DOVED DEIVIC City, State, ZIP Code : SALINA, KS 67401	Collection Method:
RR#, Street Address, Box #: //AO DOVEE DE // C	GPS unit (Make/Model:)
City, State, ZIP Code : SALINA KS 67401	☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m
3 LOCATE WELL	
WITH AN "X" IN 4 DEPTH OF COMPLETED WELL	/ ft.
SECTION BOX: Depth(s) Groundwater Encountered (1)(33.	th. (2)
WELL'S STATIC WATER LEVEL.	below land surface measured on mo/day/yr 2.6
POT VIELD Well makes	ft. afterhours pumping20 gpm
	ft. after hours pumping gpm
WELL WATER TO BE USED AS: Public water	
	r supply Dewatering Other (Specify below)
SW SE Domestic Feedlot Oli field water	n & garden Monitoring well
Was a chemical/bacteriological sample submitted to	Department? Yes You
S If yes, mo/day/yr sample was submitted	
Water well disinfected? ★ Yes No	
5 TYPE OF CASING USED: Steel Y PVC Other	
CASING JOINTS: Ka Glued Clamped Welded Threaded	
Casing diameter in. to	
Casing height above land surface	
TYPE OF SCREEN OR PERFORATION MATERIAL:	
☐ Steel ☐ Stainless Steel ☐ Cher (Specify)	
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 ft. to ft.	
SCREEN-PERFORATED INTERVALS: From	
From	
From	
6 GROUT MATERIAL: Neat cement Cement grout Benton	
	t. to
What is the nearest source of possible contamination:	
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock p	ens Insecticide storage Other (specify below)
Sewer lines Cesspool Sewage lagoon Fuel storage	
Watertight sewer lines Seepage pit Feedyard Fertilizer storm Direction from well	orage Oil well/gas well crom well
FROM TO LITHOLOGIC LOG FROM	TO LITHO. LOG (cont.) or PLUGGING INTERVALS
	ETTIO, LOG (COIL.) OF I LOGOTHO INTERVALS
O B FILL DIET BLOWD FIRM	,
32 59 SAND FINE TO MED, TAN	
59 ELAY DAEK BEAY	The state of the s
7 CONTRACTORIS OR LANDON PROPERTY OF THE PROPE	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water	r well was Constructed, reconstructed, or plugged
under my jurisdiction and was completed on (mo/day/year) Ot. 72 - 22 - 22 - 22 - 22 - 22 - 22 - 22	u uns record is true to the best of my knowledge and belief,
under the business name of PESTINGER.) PHMA. SERVICE	by (signature)
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clear	arly. Please fill in blanks and check the correct saswers. Send three copies
(white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geolog	gy 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 <u>fee</u> of \$5.00 for each <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html .	
KSA 82a-1212	