		RECORD		WWC-5	D	ivision of Wate	er			
		☐ Correction				sources App. N		Well ID		
		WATER WEI	LL:	Fraction		ection Number	1		ge Number	
County: Barton					The second secon					
2 WELL OWNER: Last Name: Lamatch First: David Street or Rural Address where well is located (if unknown, distance at									distance and	
Business: Address: 1404 NE 120 Avenue  direction from nearest town or intersection): If at owner's address, check here:									heck here:	
Address: 1476 A NE 100 Avenue, Claflin, KS										
City:	Claflin		State: KS	ZIP: 67525						
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:85 ft. 5 Latitude:										
									decimal degrees)	
SECTION BOA: 3 A ST A ST A										
WELL'S STATIC WATER LEVEL: 30						ft. Source for Latitude/Longitude:				
	below land surface, measured on (mo-day-y						PS (unit make/model:	•		
X NW-	X NW NE - D above land surface, measured on (mo-day-						(WAAS enabled? ☐ Yes ☐ No)			
Pump test data: Well water was f						☐ Land Survey ☐ Topographic Map				
W	W E afterhours pumping						Online Mapper:			
SW-	SWSE after hours pumping					-				
	Estimated Yield:gpm					6 Elevat	6 Elevation:ft. Ground Level TOC			
S=-2	S Bore Hole Diameter:10 in. to85					Source	Source: Land Survey GPS Topographic Map			
1 mile  in. to ft.										
7 WELL WATER TO BE USED AS:										
1. Domestic: 5. Public Water Supply: well ID							Field Water Supply: le	ase	*************	
	Household 6. Dewatering: how many wells?									
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores?				
☐ Livestock 2. ☐ Irrigation 2. ☐ Monitoring: well ID							sed Loop Horizont	1	al	
3. Feedlot Air Sparge Soil Vapor Extraction							a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water			
	4. ☐ Industrial ☐ Recovery ☐ Injection ☐ Injection ☐ Surface Discharge ☐ Inj. of water									
Was a chemical/bacteriological sample submitted to KDHE?										
Water well disinfected? Yes No										
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other										
Casing diameter 5 in to 85 ft. Diameter in to ft. Diameter in to										
Casing diameter										
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)										
SCREEN-PERFORATED INTERVALS: From										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
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) House  Direction from well? West Distance from well? 80ft										
10 FROM	TO		THOLOG		FROM		ITHO, LOG (cont.) or I	LUGGING	INTERVALE	
0	1	Top soil		MV U	110011	10	200 (Will) 01 I	LUGGING	LITERVALS	
1	27	Silty clay								
27		Broken rock &	k clav		1	-				
70		Sandstone &								
82		Gray shale	/							
		,								
					Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged										
under my jurisdiction and was completed on (mo-day-year)12-19-18 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No134 This Water Well Record was completed on (mo-day-year)2-25-19										
Kansas Wal	ter Well Co	ntractor's Licer	ise No	I.94 This Wa	tter Well Rec	cord was com	pleted on (mo-day-yea	r)2 <del>-</del> 25 <del>.</del> .	18	
Mail 1	white conv ale	ong with a fee of \$	5.00 for each	constructed well to Kar		of Health and Fr	twironment Rureau of Water	CWTC C	tion	
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										