WATER WELL RECORD Form WWC-5								sion of Water				
		Correction		e in Well Use	;		Resou	irces App. No		─ Well II		
1 LOCATION OF WATER WELL:				Fraction							ange Number	
County: McPherson NE1/4 NW 1/4 NE 1/2												
2 WELL OWNER: Last Name: Olson First: David Street or Rural Address where well is located (if ur												
Business:						direction	direction from nearest town or intersection): If at owner's address, check here: 🗹					
Address: 905 Emerald Dr.										_		
Address: City: Lindsborg State: Kansazip: 67456											·	
City:								T	^~ = -	400		
WITH "		4 DEPTH	I OF COM	APLETED V	WELL:	200						
SECTIO				Encountered:				Longit	ude: 97.66	0341	(decimal degrees)	
1 2) It. 3) It., or 4)						Dry W	ell		☐ WGS 84		NAD 27	
		WELL'S S	VELL'S STATIC WATER LEVEL:30					tt. Source for Latitude/Longitude:				
	1	below	above land surface, measured on (mo-day-yr					GPS (unit make/model:				
NW	NE	Pump test data: Well water was					/					
			after hours pumping gp				☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
W X	Well wat							Offine Mapper				
SW	SE	pumping gpm				1210						
				onm			6 Elevation: 1319ft. ☑ Ground Level ☐ TOC					
!	S Bore Hole Diameter:			5 in. to200 ft. and			Source: Land Survey GPS Topographic Map Other KOLAR					
1 n				in. to		ft.		1	Other NOLAN			
7 WELL WATER TO BE USED AS:												
1. Domestic:				ater Supply: v					Field Water Supply:			
Housel		6. Dewatering: how many wells?										
. —	Lawn & Garden 7. Aquifer Recharge: well ID							☐ Cas	ed Uncased [J Geotechni	ical	
Livesto												
2. Irrigati								a) Closed Loop ☐ Horizontal ☑ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
3. Feedlo						EXHACIO	(1					
4. Industrial Recovery Injection 13. Other (specify):												
Was a chemical/bacteriological sample submitted to KDHE? Yes V No If yes, date sample was submitted:												
Water well disinfected? ☐ Yes ☑ No												
8 TYPE OF CASING USED: Steel Z PVC Other												
Casing diameter												
Casing height above land surface												
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)												
										•••••		
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut ☑ None (Open Hole) SCREEN-PERFORATED INTERVALS: From												
GRAVEL PACK INTERVALS: From												
Grout Interv	als: From	0 nt	200	ft From	n 2 10	ft to		ft From	ft. to	·····	• • • • • • • • • • • • • • • • • • • •	
		le contaminat		н., топ	•••••	. n. w	•••••	11., 1 10111				
☐ Septic			Lateral Line	es □ P	it Privy			Livestock Pen	s □ Inse	cticide Stora	ige	
Sewer		_	Cess Pool		ewage L	agoon	_	Fuel Storage	_	ndoned Wate		
☑ Waterti	ight Sewer Li	ines 🔲	Seepage Pit	. □ F	eedyard			Fertilizer Stora	age 🗌 Oil V	Well/Gas We	ell	
Other (Specify) Direction from well? Southeast Distance from well? 100 ft.												
					ce from v							
10 FROM	то		LITHOLO	GIC LOG		FRO	M	TO I	LITHO. LOG (cont.)	or PLUGG	ING INTERVALS	
0		Topsoil									7.77	
1		Clay, silty										
12		Clay										
22		Sand, very f										
40	55	Sand, med-			el							
55		Sand, coars	e w/big g	ravel					**			
96	200	Shale				Note	s:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \(\big \) constructed, \(\big \) reconstructed, or \(\big \) plugged under my jurisdiction and was completed on (mo-day-year) \(\text{.9/23/2015} \) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. \(\text{.897} \). This Water Well Record was completed on (mo-day-year) \(\text{.9/30/2015} \)												
under my ju	urisdiction a	and was comp	leted on (n	no-day-year)	.9/23/2	V15	and t	his record is	true to the best of	my knowle	edge and belief.	
Kansas Wa	ter Well Co	ntractor's Lic	ense No	t Drilling In	This W	ater Wel	i Keco	ord was com	pieted on (mo-day	-year) 363	W <i>A</i> UJD	
under the b	usiness nam	Send one	WATER W	AELL CARRIER	and ortain	one for		rde Fancter	Lan Muris	J	***************************************	
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.												
1 -		eks.gov/waterwe						,			KSA 82a-1212	