WATER W	ELL RI	ECORD	Form V	WWC-5			ion of Water			MW-5	
Original Re				e in Well Use			rces App. No.	<u> </u>	Well ID		
1 LOCATIO		TER WEL	L:	Fraction SE	I	Section	on Number	Township Numb		nge Number	
County: Ness				SW1/4 NW1/4 11 13						1 □E ■ W	
2 WELL OWNER: Last Name: First:						Street or Rural Address where well is located (if unknown, distance and					
Business: K		•	direction from nearest town or intersection): If at owner's address, check here					check here: 🔲			
Address: 1(Address:	000 SW J	ackson St.,	Suite 41	0	214 Nort	214 North Main St.					
	opeka		State: KS	ZIP: 66612	2.111011		Ot.				
3 LOCATE V					44.9 ft. 5 Latitude: 38.444916 (decimal degrees)						
WITH "X"		4 DEPTH	OF COM	IPLETED WELL:	44 .9	ft.	5 Latitude	38.4449	16	(decimal degrees)	
SECTION E		Depth(s) Gro	oundwater l	Encountered: 1)2	<u>6.1</u> ft.		Longitude: -99.642458 (decimal degrees) Horizontal Datum: □ WGS 84 ■ NAD 83 □ NAD 27				
N				3) ft., or 4)		11				83 🔲 NAD 27	
 				TER LEVEL:				r Latitude/Longitude			
	'			, measured on (mo-day				(unit make/model:			
NW I	NE	above land surface, measured on (mo-day-y Pump test data: Well water was ft.				■ Land Survey ☐ Topographic Map			10)		
w H	+ _E	after hours pumpingg									
1 1 1	1	Well water was ft				_ Omno Mapper					
SW	after	after hours pumping g			2122 44						
	X	Estimated Yield:gpm				6 Elevation: 4.144.77tt. Ground Level					
s	Bore Hole D	ore Hole Diameter: 8.75 in to 44.9			. ft. and Surve: Land Surv			y GPS Topographic Map			
1 mile ft. Utner											
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID											
1. Domestic:				iter Supply: well ID							
Household		6. 🗀	Dewaterin	g: how many wells?				e: well ID			
☐ Lawn & Garden 7. ☐ Aquife ☐ Livestock 8. ■ Monite			Aquiter R	echarge: well IDg: well IDM	W-5		☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?				
2. Irrigation											
			l Remediation: well ID			 a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 					
4. Industrial Recover								er (specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:											
Water well disinfected? Yes No CASPIC IONITS FIGURE FIRE A FINAL FINAL FIRE A FINAL FINAL FIRE A FINAL FIR											
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other											
Casing diameter 2 in to 44.9 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 0 in Weight lbs./ft. Wall thickness or gauge No. SCh. 40.											
Casing height above land surface											
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel											
☐ 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 Wranned ☐ Saw Cut ☐ None (Onen Hole)											
SCREEN-PERFORATED INTERVALS: From 34.9 ft. to 44.9 ft. From ft. to ft. From ft. to ft.											
GRAVEL PACK INTERVALS: From32.9 ft. to44.9 ft., From ft. to ft., From ft. o ft.											
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) Direction from well? Distance from well? ft.											
10 FROM	TO		ITHOLOG		FRON			THO. LOG (cont.) o		C INTERVALE	
0 10		ilt, brown, di		JIC LOG	FRUN	11	10 LI	1110. LOG (COIII.) 0	LILUGGIN	G INTERVALS	
10 21		lay, brown, di		astic							
21 29				vn, fine, wet					***************************************		
29.5 45		and, light br									
-5.5		uno, nunt bi	OWII, IIIIE	, WCL							
				· · · · · · · · · · · · · · · · · · ·						20	
				**************************************	NT.4.						
Notes:											
11 CONTRA	CTOPIC	ODIANDO	WATER TO TA	CEPTIFICATIO	No This		wall	onatmicted [7]	onat	or I aluand	
under my jurie	diction an	ok LANDU d was comple	eted on (n	S CERTIFICATIO no-day-year) 1-23-2	14: 1 ms v 2020 -	and th	wen was 📰 (rue to the best of m	Justructed, IV knowled	or ∐ prugged ge and helief	
Kansas Water	Well Cont	ractor's Lice	nse No. 6	04 This W	ater Well	Reco	rd was comn	leted on (mo-day-v	ear) 2	24/20	
under the busin	ness name	of Environ	mental Pi	riority Service, Inc.		Sigr	nature	4 mt			
Mail 1 wh	nite copy alor	ig with a fee of \$	5.00 for eac	ch constructed well to: Ka	ınsas Departi	ment o	f Health and En	vironment, Bureau of W	ater, GWTS	Section,	
T .			-	66612-1367. Mail one to				for your records. Telepl			
Visit us at http://w	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										

