WATER WELL R		WWC-5		ision of Water				
Original Record		ge in Well Use		ources App. No.	<del>,</del>	Well ID		
1 LOCATION OF W		Fraction		tion Number	Township Number			
County: Negs 4 4NE45E4 530 T/8 S R23 DE XIW								
2 WELL OWNER: Last Name: Mctzker First: Rebert Street or Rural Address where well is located (if unknown, distance and								
Business: direction from nearest town or intersection): If at owner's address, check here:								
Address: 203 N Topeker 203, North Tepeker								
City: 1295 City State: K5 ZIP: 67560 NEGS City Ks. 67560								
3 LOCATE WELL			<del></del>	1	20100	• /		
WITH "X" IN	4 DEPTH OF COMPLETED WELL: 5C ft. 5 Latitude: 38 27 18.4 (decimal degrees							
SECTION BOX:	N ROX. Depth(s) Groundwater Encountered: 1)				5 Latitude: 38.27.18.4			
N					Horizontal Datum: WWGS 84 LI NAD 83 LI NAD 27			
	WELL'S STATIC WATER LEVEL: ZCft.				Source for Latitude/Longitude:			
	below land surface, measured on (mo-day-yr)							
NW NE	above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)			
W E					☐ Land Survey ☐ Topographic Map			
		vater was f	₩ Oun	Online Mapper:				
SW SE	SW   SE   after hours numping graph							
	Fistimated Vield: 10" cmm				6 Elevation:2250ft. 🗷 Ground Level 🗆 TOC			
	S Bore Hole Diameter:				Source:   Land Survey GPS Topographic Map			
mile	<del></del>	in. to	ft.		☐ Other			
7 WELL WATER TO BE USED AS:								
1. Domestie:		ater Supply: well ID				e		
Household		ng: how many wells?			11. Test Hole: well ID			
		echarge: well ID		_	☐ Cased ☐ Uncased ☐ Geotechnical			
2. ☐ Irrigation	8.   IVIONITORIN	g: well ID	······		12. Geothermal: how many bores?			
3. ☐ Feedlot	9. Environmental Remediation: well ID				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water			
4. Industrial Recovery Injection					13. Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:								
Water well disinfected? ☐ Yes ☐ No  8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other								
Cosing flowers (Camped   Clamped   Welded   Inreaded								
Casing diameter 5 in. to £4 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface £4 in. Weight 2.7 lbs/ft. Wall thickness or gauge No 7 mm.								
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								
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)								
SCREEN-PERFORATE	D INTERVALS: From	1.2C ft to $4C$	ft., From	ft. to	ft., From	ft. to ft.		
GRAVEL PACK INTERVALS: From 20 ft. to								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possible contamination:								
☐ Septic Tank	☐ Lateral Line			Livestock Pens	☐ Insecticide			
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedward ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
□ Watertight Sewer Lines       □ Seepage Pit       □ Feedyard       □ Fertilizer Storage       □ Oil Well/Gas Well         □ Other (Specify)       □ Other (Specify)								
Direction from well?		Distance from we	 112		Ð			
10 FROM TO	LITHOLOG		FROM			LUGGING INTERVALS		
0 10	Seril		- ROW	- 10   11	o. Doo (cont.) of I L	OSSITIO INTLICATED		
10 20	Seil, Sand		<del>                                     </del>					
20 30	Sand		+					
30 40	9/00/1							
40 50		halt	†					
		· · · · · · · · · · · · · · · · · · ·						
			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) 15.77.79 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No. 651. This Water Well Record was completed on (mo-day-year) 1-7-19								
under the business name	of	Vx. Meng.	Sig	nature /	<b>5</b>			
Mail I 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.								
t .	Suite 420, Topeka, Kansas							
Visit us at			KSA 82a-12	1.2		Revised 7/10/2015		