WATER	WELL R	ECORD	Form '	WWC-5		Divi	sion of Water			MW2	
Original	Record _	Correction	☐ Chang	e in Well Use		Resou	urces App. No		Well ID		
		ATER WEL	L:	Fraction			ion Number			nge Number	
County: NESS SE¼ NW¼ SW¼											
2 WELL	OWNER: L	ast Name: DEI	NES	First: E. JAY	reet or Rural Address where well is located (if unknown, distance and						
Business: dir Address: 120 WEST SYCAMORE STREET							rection from nearest town or intersection): If at owner's address, check here:				
Address: Address:	120 WES	SYCAMO	RESIRE	EI							
City:	NESS CIT	~	State: KS	ZIP: 67560							
3 LOCATE WELL WITH "Y" IN 4 DEPTH OF COMPLETED WELL:						40 -		20 452	17		
WITH "		4 DEPTH	OF COM	IPLETED WEL	L:	49 ft.	5 Latitu	de: 38.453		(decimal degrees)	
SECTIO	N BOX:	Depth(s) Gr	Depth(s) Groundwater Encountered: 1)30 2)				Longitude: 99.90634 (decimal degrees) ell Horizontal Datum: WGS 84 NAD 83 NAD 27				
N	1	2)	II. CATIC WA	5) π., or TER LEVEL:	26.33	ry well				83 LI NAD 27	
		below land surface, measured on (mo-day-yr).						for Latitude/Longitude'S (unit make/model: .		,	
NW	NE	above land surface, measured on (mo-day-yr)						(WAAS enabled? [			
	i i	Pump test data: Well water was ft.					Land Survey Topographic Map				
w <del>       </del>	E	after hours pumping gpi				n	Online Mapper:				
sw	SF	Well water was ft.									
	x SL	after hours pumping gpn				6 Elevation: 2251.22ft. ☐ Ground Level ■ TOC					
	S	Estimated Yield:gpm Bore Hole Diameter: 8.5 in. to 40 ft									
1 n		in. to ft				Other					
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. Public Water Supply: well ID											
☐ Housel		6. □	6. ☐ Dewatering: how many wells?				11. Test Hole: well ID				
☐ Lawn &	& Garden	7.	7. ☐ Aquifer Recharge: well ID								
							12. Geothermal: how many bores?				
				al Remediation: well ID			a) Closed Loop    Horizontal    Vertical				
3. Feedlot Air Spars			· •			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											
Casing diameter 2 in to 40 ft., Diameter in to ft. Diameter in to ft.											
Casing height above land surface											
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											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete Surface Completion 0 -1											
Grout Intervals: From											
	-			Dia D.:			I income alla Dan	🗖		_	
☐ Septic			Lateral Line Cess Pool	es 🔲 Pit Pri 🔲 Sewag			Livestock Per Fuel Storage		ticide Storage doned Water		
☐ Watert	ight Sewer Li	nes 🗖	Seenage Pit	☐ Feedys	ard		Fertilizer Stor		ell/Gas Well		
Other (Specify)   Direction from well? NORTHEAST   Distance from well? 20   ft.											
Direction fro	om well? .NC	RTHEAST	• • • • • • • • • • • • • • • • • • • •	Distance fro	m well?	20			ì.		
10 FROM	10	<u> </u>	TINOLO	GIC LOG		FROM		LITHO. LOG (cont.)		G INTERVALS	
0		CONCRETE									
.5		SILTY CLAY									
22		SANDY CLA	·Υ								
28		SAND									
34	40 5	SHALE									
					T						
					I	Notes:					
U6-068-15094											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my j	urisdiction a	nd was comp	leted on (r	no-day-year) <u>.4/1.</u> 585	어.(爿	and t	this record is	s true to the best of	ny knowled	ge and belief.	
Kansas Wa	ner Well Con	ntractor's Lic	ense No. :	NVIRONMENT	s water Al IN∩	well Kec	ora was com	npleted on (mb-day-	A SAMPAGA	<b>×</b>	
Mail	1 white conv ale	ong with a fee of	\$5.00 for ea	ch constructed well to	Kansas	Department	of Health and I	Environment, Bureau of	Water, GWTS	Section,	
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Burgay 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.											
		o gov/woterwell/				A 82a-12		-		17/10/2015	

