WATE.	K WEI	LL RECORD	Form W	WC-5	Di	vision of Wate	r Resources App. No	0.	
1 LOCATION OF WATER WELL:			Fraction		Section	on Number	Township No.	Range Number	
County: Wichita			1/4 SE 1/4 NW			17	T 18 S	R 35 □E <b>[7</b> ]W	
Street/Rural Address of Well Location; if unknown, distance & direction						Global Positioning System (GPS) information:			
from nearest town or intersection: If at owner's address, check here <b>\( \mathbb{L} \)</b> .						Latitude: (in decimal degrees)			
						Longitude: (in decimal degrees)			
						Elevation:			
A WATER WAY I OWNER						<u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
2 WATER WELL OWNER: August Baker						Collection Method:			
RR#, Street Address, Box #: 106 N. A Street						GPS unit (Make/Model:)			
City, State, ZIP Code : Marienth			nal, KS 67863		Digital Map/Photo, Topographic Map, Land Survey				
				Est. A	<u>Est. Accuracy</u> :				
3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 162 ft.									
SEC.	SECTION BOX: Depth(s) Groundwater Encountered (1)								
WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr. 3/1.1/1.14									
Pump test data: Well water was .137'6"ft. after .3									
					ft. after hours pumping gpm				
w   _			ter 10 in. to						
WELL WATER TO BE USED AS: □ Public water supply □ Geothermal □ Injection well									
sv	v   . 🔏							Other (Specify below)	
Irrigation									
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No									
S If yes, mo/day/yr sample was submitted									
Water well disinfected?									
5 TYPE OF CASING USED: Steel PVC Other									
CASING JOINTS: Glued Clamped Welded Threaded									
CASING JOINTS: M. Glued   Clamped   Welded   Inreaded									
Casing diameter .5 in. to .137									
Casing height above land surface. 18 in., Weight 200 lbs./ft., Wall thickness or gauge NoSDR21.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☑ PVC ☐ Other (Specify)									
SCREEN OR PERFORATION OPENINGS ARE:									
SCREEN OR PERFORATION OPENINGS ARE:   Continuous slot									
□ Continuous stot  □ Min stot □ Gauze wrapped □ Torch cut □ Drined noies □ None (open noie) □ Louvered shutter □ Key punched □ Wire wrapped □ Saw cut □ Other (specify)									
SCREEN-PERFORATED INTERVALS: From 137 ft. to 162 ft., From ft. to ft.									
From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From									
From ft. to ft., From ft. to ft.									
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From .5 ft. to .25 ft., From ft. to ft., From ft. to ft.									
What is the nearest source of possible contamination:									
Septic tank									
☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedvard ☐ Fertilizer storage ☐ Oil well/gas well									
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well  Direction from well .50uth West ☐ Distance from well .100.									
FROM	TO	LITHOLOG	IC I OG	FROM	TO TO			GGING INTERVALS	
0	2		C DOG	100	107		, Few Medium S		
2		Top Soil		100			<u>7, rew Medium S</u> Coarse Sand, S		
	26	Brown Clay		107	129		<del> </del>		
26	35	Brown Clay, Gypsum	1.0		4==		Clay Streaks(S		
35	65	Medium to Coarse San	d, Small Gravel	129	157	<del></del>	Coarse Sand, S	mail Geavel	
65	69	Brown Clay				(Loose- Clean)			
69	75	Cemented Sand	157	162	Yellow Soa	apstone			
75	78	Fine Sand							
78	81	Fine Sand, Cemented Sand Streaks							
81	100	Fine to Medium Sand, Small Gravel,							
		Few Brown Clay and C					"		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was   ☐ constructed, ☐ reconstructed, or ☐ plugged									
under my jurisdiction and was completed on (mo/day/year) .9/10/14 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 532 This Water Well Record was completed on (mo/day/year) .9/1.7/14									
under the business name of Midwest Well & Pump Inc. by (signature)									
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies									
(white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.									
Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at									
http://www.kdheks.gov/waterwell/index.html									
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy									