WAT	ER WEL	L RECORD For	rm WWC-5		Division of V						
Ori	ginal Record	Correction C			lesources Ap			Well ID	L		
		WATER WELL:	Fraction		Section Nur	nber	Township Numbe		ge Number		
	unty: Barto		¼ NW ¼ NE								
Z WE Busin		R: Last Name: Wood	First: Floyd	Street or l	eet or Rural Address where well is located (if unknown, distance and						
	ess: P.O B	ox 65	direction fro	direction from nearest town or intersection): If at owner's address, check here:							
Addr		JA 00		400 E 6th	400 E 6th Street, Ellinwood, KS						
City:	New College Co	ood State:	KS ZIP: 67526								
	ATE WELL	4 DEPTH OF C	OMDI ETEN WELL	. 51	51 4 6 7 44 3 38 360200						
	WITH "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)					51 ft. 38.360288 (decimal degrees) Longitude: 98.575768 (decimal degrees)					
SEC	SECTION BOX:    Depth(s) Groundwater Encountered: 1)					ngitud	e:98.5/5/5	ğ(	decimal degrees)		
		WELL'S STATIC	WATER LEVEL:	17 n	Dry Well Horizontal Datum: ☐ WGS 84 ■ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr).					GPS (	mit make/model:		,		
NW	NW NE					GPS (unit make/model:					
		Pump test data: W	ell water was	. ft.		☐ Land Survey ☐ Topographic Map					
W						Online Mapper:					
SW	SW SE Well water was ft. after hours pumping gpm										
		Estimated Vield	Estimated Yield:gpm			6 Elevation:ft. Ground Level TOC					
	S	Bore Hole Diamete	Bore Hole Diameter:10 in. to 51			Source: Land Survey GPS Topographic Map					
	in. to				1 223		Other	3 LJ 10	ograpine map		
mile  mile  in. to											
1. Domes			Water Supply: well ID	••••	. 10. 🗆	Oil Fiel	d Water Simply: Jeac				
-	☐ Household 6. ☐ Dewatering: how many wells?			***************************************	. 11. Tes	11. Test Hole: well ID					
	■ Lawn & Garden 7. ☐ Aquifer Recharge: well ID				. 🗆	Cased	☐ Uncased ☐ Geo	technical			
Live		•••••	. 12. Ge	otherma	d: how many bores?.		••••				
	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparse ☐ Soil Varor F					a) Closed Loop   Horizontal   Vertical					
					b)	b) Open Loop Surface Discharge Inj. of Water					
13. Other (specify):											
Was a chemical/bacteriological sample submitted to KDHE? Tyes No. If yes, date sample was submitted.											
Water well disinfected? We yes I I No											
8 1 Y PE UF CASING USED: ☐ Steel ☐ PVC ☐ Other											
Casing diameter											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 5 in to 51 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 18 in Weight SDR-26 lbs./ft. Wall thickness or gauge No.											
The state of the control of the cont											
☐ 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 (Specific)											
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ Mong (Open Hele)											
SCREEN-PERFORATED INTERVALS: From41 ft to 21 ft From ft to the first ft t											
GRAVEL PACK INTERVALS: From											
9 GROUI WATERIAL: Neat cement   Cement grout   Bentonite   Other											
Grout intervals: From											
Nearest so	urce of possi	ole contamination:							¢		
☐ Septio		Lateral Li			Livestock P		☐ Insecticide	Storage			
	tight Sewer L	ines Cess Pool	<u> </u>	goon 🗀	Fuel Storag	e	☐ Abandoned	Water We	11		
			Pit Feedyard	Ц	Fertilizer St	torage	Oil Well/G	as Well			
Direction fi	om well?	South	Distance from w	ell? 30ft			Δ				
10 FROM	TO	LITHOL	OGIC LOG	FROM	ТО		n. O. LOG (cont.) or PLI	ICCNICE	NITTEDSTATE		
0	3	Top soil		- ******	1.0		o. Doo (com.) of PL	JOUING I.	NIEKVALS		
3	17	Brown clay									
17	41	Gravel- med									
41	51	Tan clay									
								0.00			
				Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo day year) 2.1.18											
under my jurisdiction and was completed on (mo-day-year) 8-1-18											
Mail 1 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.											
Visit us at a transpul/www.kaneks.gov/waterweii/index.html KSA 82a-1212 Revised 7/10/2015											