	WELL P			WWC-5		ivision of V					
	l Record			ge in Well Use		sources Ap			Well ID		
		ATER WEL	L:	Fraction		ection Nur	nber	Township Numb		ige Number	
County: Rice											
						Street or Rural Address where well is located (if unknown, distance and lirection from nearest town or intersection): If at owner's address, check here:					
Address: 745 00rd Dand						1/2 N, 3W of Little River, KS					
Address:	, , , , ,				1 1/2 IN, 3	1/2 N, 3VV OI Little RIVEI, RS					
City:	Lyons		State: KS	ZIP: 67554							
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:											
	ON BOX:		Depth(s) Groundwater Encountered: 1)			ft. Longitude:(decima					
1	N			3) ft., or 4)		Ho	rizonta	l Datum: ☐ WGS 8	4 □ NAD	83 🗆 NAD 27	
	WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day-yr							r Latitude/Longitude			
'								(unit make/model:			
NW	NE	above land surface, measured on (mo-day-yr) Pump test data: Well water was				······· (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			(0)		
w	X E	after hours pumping gpn				Online Mapper:					
ew/	SE		Well water was ft. after ppi								
] 3,	36	after	gpm	6 Elevation:ft. Ground Level TOO				LLevel T TOC			
	S	Rore Hole I	Estimated Yield:gpm Bore Hole Diameter:8in. to				the state of the s				
1	mile	Bore Hole L		in. to		20	Other				
7 WELL WATER TO BE USED AS:											
1. Domestic				ater Supply: well ID		. 10.] Oil Fi	eld Water Supply: 1	ease		
	☐ Household 6. ☐ Dewatering: how many wells?					11. Test Hole: well ID					
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID										
1 =	☐ Livestock 8. ☐ Monitoring: well ID							nal: how many bore			
3. Feedlo	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext						a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. Indust			Recovery		Extraction						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter in. to											
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No											
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 ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
SCREEN-PERFORATED INTERVALS: From ft., From ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible contamination:											
Sewer			Lateral Line Cess Pool			Livestock			cide 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 fro	om well?			Distance from w	ell?						
10 FROM	TO	I	ITHOLO		FROM	TO		ΓΗΟ. LOG (cont.) or		G INTERVALS	
0		op soil								1	
4		clay									
10	-	shale sand rock			-						
15		shale					+-				
20			ard sand rock				-				
22			Notes:								
	22 78 shale with very few sand rock streaks Notes:										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my j	under my jurisdiction and was completed on (mo-day-year) .09/27/19 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186										
Kansas Wa	ater Well Con	ntractor's Lice	ense No	IOO This W	ater Well R	ecord was	compl	eted on (mo-day-y	ear) U6/28	/.).9	
Mail	1 white copy ale	ong with a fee of	\$5,00 for each	ell Service, Inc	nsas Denartme	ent of Health	and Fnv	ironment. Bureau of W	ater, GWTS	Section.	
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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										