WAIERV	VICILI	RECORD	rorm w	WC-5	Divis	ion of V	Vater Resc	ources App.	No.		
NY /		WATER WELL: F		SE 1/4 S	Se W 1/4	ction N 14	lumber	Township	Number	Range Number	
Street/Rural Ad	ddress of	Well Location; if unkno	wn, distance &	direction	Glo	bal Pos	sitioning	System (G	PS) inform	nation:	
from nearest to	wn or inte	ersection: If at owner's a	address, check l	nere □.	La	ititude:				(in decimal degrees)	
13.5 Miles N	W of No	rton, KS on Rd D be	etween W5 &	W6	Lo	ongitud	e:		((in decimal degrees)	
					El	evation	1:				
2 WATER	WELL (OWNER Tim Sprig	\mathbf{g}					4, □ NAD	83, □ N.	AD 27	
RR#, St. A						llection l					
City, State, ZIP Code Norton, KS 67654						☐ GPS unit (Make/Model: ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey					
					[☐ Digital	1 Map/Phot	o, 🖵 Topogra	aphic Map, L	Land Survey	
2 T OC 4 TO T	1 XX/X1X X				<u>Es</u>	t. Accura	<u>ıcy: Ц <3</u>	m, 🗆 3-5 m,	∟ 5-15 m,	□ >15 m	
3 LOCATE											
WITH A			OMPLETED V	WELL 5	52			ft.			
SECTION	N BOX:	Depth(s) Groundw	ater Encountere	ed (1)		ft.	. (2)		ft. (3) .	ft.	
N	l	WELL'S STATIC	WATER LEVI	EL 42	ft. b	elow lar	nd surface	measured or	n mo/day/y	r	
		Pump	test data: W	ell water wa	ıs	ft	t. after	h	ours pumpi	ng gpm	
- NW-	— NË —	EST. YIELD	gpm: W	ell water wa	ıs	ft	t. after	h	ours pumpi	ng gpm	
	Ţ.	WELL WATER TO	O BE USED AS	S: 🗆 Publ	ic water su	upply [☐ Geothe	rmal	☐ Inject	ion well	
W -		E X Domestic I	eedlot Oil	field water s	ainnly	`` [☐ Dewate	ring	☐ Other	(Specify below)	
l sw-	— sE —	Irrigation I	ndustrial 🔲 I	Omestic-law	vn & garde	en [☐ Monito	ring well			
SW SE Irrigation Industrial Domestic-lawn & garden Monitoring well Was a chemical/bacteriological sample submitted to Department? I Yes INO											
5			y/yr sample was								
1	•									3.	
Water Weit Distincted. Ed 165 Ed 160											
5 TYPE OF	CASING	USED: LI Steel	l⊠ PVC	Other							
CASING JOI	NTS: L	Glued Clamped	d ☐ Weld	led \square	Threaded						
Casing diameter 4.5 in. to 32 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 18 in., Weight 2.38 lbs./ft. Wall thickness or gauge No248											
Casing neight above land surface 18 in., Weight 2.38 lbs./ft. Wall thickness or gauge No248											
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☒ PVC ☐ Other (Specify)											
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
		☐ Mill slot	☐ Gauze wra	pped 🔲 T	Forch cut		Drilled b	noles 🗆	None (ope	n hole)	
☐ Louve	red shutte	r	☐ Wire wrap	bed 🗵 S	Saw cut		Other (s	pecify)			
SCREEN-PER	FORATE	D INTERVALS:	From	32 ft	t. to	52	ft., Fr	om	ft. t	o ft.	
			From	ft	t. to		ft., Fr	om	ft. t	oft.	
GRAV	EL PACK	INTERVALS:	From	_20 ft	t. to	52	ft., Fr	om	ft. t	o ft.	
			From	ft	t. to		ft., Fr	om	tt. t	oit.	
6 GROUT N	ATERI	AL: Neat cement	Cement g	rout	⊠ Bentor	nite	Other				
Grout Intervals	s Fro	om 0 ft. to	20 ft. Fro	om	ft. to		ft.	From		ft. to ft.	
What is the ne	arest sour	ce of possible contamin	ation:								
☐ Septic		Lateral lines			Livestock _I			icide storage		ther (specify below)	
Sewer		Cesspool	☐ Sewage		Fuel storag			doned water			
Direction from		r lines	☐ Feedyar		Fertilizer s			ell/gas well	Non		
FROM	ТО		OGIC LOG	····	FROM	TO	LITHO	LOG (con	t.) <u>or</u> PLUC	GGING INTERVALS	
0		Surface				***************************************					
2		Loess		· · · · · · · · · · · · · · · · · · ·							
18		Fine sand w/clay ler									
39 47		Sandstone with stre Fine sand with clay	aks ciay								
53		Flint & cemented sand									
60		Yellow ochre	iiu							Annual Control of the	
00	13	A CHOW UCHIE									
			·								
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) 1/20/12											
Kansas Water	Well Con	tractor's License No.	554	. This Wat	ter Well R	ecord w	as comple	eted on (mo/	day/year)	2-14-12	
under the busi	ness name	of Woofter Pump	& Well Inc.	b	y (signatur	e) ,	Main!	Muloup	to	,	
INSTRUCTION	IS: Please t	ill in blanks and check the c	orrect answers. S	end three copie	s (white, bl	ue. pinke	to Kansas	Department o	f Health and	Environment, Bureau of	
INSTRUCTIONS: Please fill in blanks and check the correct answers. Send three copies (white, blue, pine 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 to WATER WELL OWNER and retain											
one for your rec	ords. Inclu	de fee of \$5.00 for each co	onstructed well. \	√isit us at http	://www.kdi	ieks.gov/	/waterwell/	index.html.			