

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

20070007

1 LOCATION OF WATER WELL: County: Barton		Fraction SE ¼ SE ¼ SW ¼		Section Number 16	Township Number T 20 S	Range Number R 12W E/W																																																																		
Distance and direction from nearest town or city street address of well if located within city? 3 1/2S of Dartmouth, KS				Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																																																																				
2 WATER WELL OWNER: Virgil Salem RR#, St. Address, Box # : 2095 NE 80 Ave. City, State, ZIP Code : Ellinwood, KS 67526																																																																								
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">W</td> <td style="width: 40px; text-align: center;">-- NW --</td> <td style="width: 40px; text-align: center;">-- NE --</td> <td style="width: 20px; text-align: center;">E</td> </tr> <tr> <td></td> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">-- SW --</td> <td style="text-align: center;">-- SE --</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">S</td> <td style="text-align: center;">X</td> <td></td> </tr> </table>		W	-- NW --	-- NE --	E						-- SW --	-- SE --							S	X		4 DEPTH OF COMPLETED WELL 117 ft. Depth(s) Groundwater Encountered (1).....40..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL.....40..... ft. below land surface measured on mo/day/yr 01/05/07.... Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield.....60.....gpm: Well water was.....ft. after..... hours pumping..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes No																																																		
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)01/05/07..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/year)01/20/07..... under the business name of Kelly's Water Well Service, Inc. by (signature) <u>Kathryn R Good</u>																																																																								
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies 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 records. Fee of \$5.00 for each <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html .																																																																								