WATER WELL RECORD Form WWC-5			sion of Water arces App. No.		Well ID		
Original Record Correction Change in Well Use I LOCATION OF WATER WELL: Fraction			ion Number	Township Number			
County: Stattord "NW NW SU" 32 T ZI S R 13 DEXIN							
2 WELL OWNER: Last Name Gardker First Lyan Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:							
Business: 2817 9th 5t Address: 2817 9th 5t Address: 2817 9th 5t Merction from nearest town or intersection): If at owner's address, check here: Merction from nearest town or intersection): If at owner's address, check here: Merction from nearest town or intersection): If at owner's address, check here: Merction from nearest town or intersection): If at owner's address, check here: Merction from nearest town or intersection): If at owner's address, check here: Merction from nearest town or intersection from nearest town or intersect							
City: Great Bend State: K5 ZIP 67530							
3 LOCATE WELL WITH "X" IN	4 DEPTH OF COMPLETED WELL		5 Latitude		(decimal degrees)		
SECTION BOX:	Depth(s) Groundwater Encountered: 1)				(decimal degrees)		
N	WELL'S STATIC WATER LEVEL:20	2)			Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:		
		GPS (unit make/model:)					
NW NE	above land surface, measured on (mo-da	(WAAS enabled? ☐ Yes ☐ No)					
W E	Pump test data: Well water was		☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
	Well water was			e Mapper			
\$wse	after hours pumping	gpm	6 Flevation	a: A	☐ Ground Level ☐ TOC		
	Estimated Yield:9gpm Bore Hole Diameter:9.in. to95	ft and			SPS Topographic Map		
mile	in. to						
7 WELL WATER TO BE USED AS:							
1. Domestic:	5. Public Water Supply: well ID				ise		
☐ Household ☐ Lawn & Garden	 Dewatering: how many wells? Aquifer Recharge: well ID 			e: well ID ☐ Uncased ☐ G			
Livestock	8. Monitoring: well ID			nal: how many bores			
2. Irrigation	9. Environmental Remediation: well			Loop Horizonta			
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapo ☐ Recovery ☐ Injection	r Extraction			charge Inj. of Water		
4. ☐ Industrial ☐ Recovery ☐ Injection ☐ 13. ☐ Other (specify):							
Weter well disinfacted? Myon Cl No.							
8 TYPE OF CASING USED: ☐ Steel ☑ PVC ☐ Other							
Casing diameter							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
☐ Steel ☐ Stainless Steel ☐ Fiberglass							
☐ 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 stot □ Gauze Wrapped □ Totel Cut □ Direct Totes □ Other (Speerly)							
SCREEN-PERFORATI	ED INTERVALS: From75 ft. to9	ft., From	ft. to	ft., From	fl. to fl.		
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From							
Nearest source of possible contamination:							
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage							
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ☐ Watertight Sewer Lines ☐ Seepage Pita ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well							
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well ☑ Other (Specify)							
Direction from well?	Distance from			ft.			
10 FROM TO	LITHOLOGIC LOG	FROM	TO LIT	HO. LOG (cont.) or	PLUGGING INTERVALS		
0 3	Sandy top soil						
30 54	Clay W/ Sand Fine						
56 20	Jay W/grave Stracks						
70 75	Blue / Jay W/ gravel						
75 45	Small loose grave						
Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No							
under my jurisdiction and was completed on (mo-day-year) A. A. I. I. M. and this record is trate to the best of my knowledge and belief. This Water Well Record was completed on mo-day-year) This Water Well Record was completed on mo-day-year)							
under the business name of							
Mail I 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							
visit us at http://www.kdfleks	gov/ water well/ilidex.iitilii	024 121					