

WATER WELL RECORD Form WWC-5

Original Record Correction Change in Well Use

Division of Water Resources App. No.

Well ID

1 LOCATION OF WATER WELL: County: Stafford Fraction 1/4 NE 1/4 NW 1/4 SE 1/4 Section Number 13 Township Number T 22 S Range Number R 13 E W

2 WELL OWNER: Last Name: Kiefer First: Andrew Street or Rural Address where well is located 2 North, 1 3/4 West of Hudson

3 LOCATE WELL WITH 'X' IN SECTION BOX: [Diagram] 4 DEPTH OF COMPLETED WELL: 100 ft. 5 Latitude: Longitude: Elevation:

7 WELL WATER TO BE USED AS: 1. Domestic 2. Irrigation 3. Feedlot 4. Industrial 5. Public Water Supply 6. Dewatering 7. Aquifer Recharge 8. Monitoring 9. Environmental Remediation 10. Oil Field Water Supply 11. Test Hole 12. Geothermal 13. Other

Was a chemical/bacteriological sample submitted to KDHE? Water well disinfected?

8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 5 in. to 100 ft. Diameter 18 in. Weight SDR-26 lbs./ft. Wall thickness or gauge No.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From 20 ft. to 0 ft. Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage

Table with 6 columns: 10 FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Rows include Sandy top soil, Sandy brown/ tan clay, Sand & gravel- small to med dirty, Sand & gravel- clean, Sand & gravel- small to med dirty.

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 10-5-18 and this record is true to the best of my knowledge and belief.

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.