WATER WELL RECORD		Form WWC-5		Division of Wa	ter Resources App. N	o. L	
1 LOCATION OF WAT County: C	TER WELL:	Fraction 1/45 E1/10	1111614	C C T		Range Number R D DE W	
Street/Rural Address of			ng System (GPS) in				
from nearest town or intersection: If at owner's address, check here							
Longitude:							
EI					<u></u> <u></u>	••••	
2 WATER WELL OWNER: GOOG (\GCV				Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
DD# Charat Address Don #				Collection Method:			
City State 7ID Code				☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
Hutchinson, KI LISTEST Acc					- 1000, ☐ 10p0g1apin	5-15 m. $\square > 15$ m	
13 LOCATE WELL							
WITH AN "X" IN	4 DEPTH OF C	COMPLETED WEL	L	<u> </u>	t.		
SECTION BOX:							
WELL'S STATIC WATER LEVEL below land surface measured on mo/day/yr. 1.1.							
Pump test data: Well water wasft. after							
- Xrw NE	EST. YIELDgpm. Well water wasft. after hours pumpinggpm						
w E Bore Hole Diameter							
SW SE - Domestic Feedlot Oil field water supply Dewatering Other (Specify below)							
Irrigation □ Industrial ★ Domestic-lawn & garden □ Monitoring well							
Was a chemical/bacteriological sample submitted to Department? Yes No							
S If yes, mo/day/yr sample was submitted							
1 mile Water well disinfected? Yes □ No							
5 TYPE OF CASING USED: Steel PVC Other							
CASING IOINTS: Glued Clamped Welded Threaded							
Casing diameter							
Casing diameter							
TYPE OF SCREEN OR PERFORATION MATERIAL: .							
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)							
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)							
Louvered shutter Key punched Wire wranged Saw cut Other (specify)							
From - ft to - ft From ft to ft							
From							
From							
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From							
What is the nearest source of possible contamination:							
Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)							
Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well							
Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well							
Direction from well				from well\			
FROM TO BY	LITHOLOG		FROM	TO LITHO.	LUG (cont.) or PLU	GGING INTERVALS	
	A 100 2	201					
12 18 11	17/2020						
18 33 Pea	<u>512491</u>	<u> </u>	.				
			-				
			 				
			 				
			 				
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)							
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo/day/year)							
under the business name of Son Son Son Start Sy (signature)							
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.							
Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at							
http://www.kdheks.gov/waterwell/index.html.							
KSA 82a-1212							