WATE	R WEI	L REC	CORD	Form \	WWC-5	Division of Wate	r Resources App. N	[0,	
	CATION nty: Ren		TER WELL:	Fraction SW 1/4 NW 1/4 S	SE 1/4 NE 1/4	Section Number	Township No. T 22 S	Range Number R 5	
Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information:									
from nearest town or intersection: If at owner's address, check here . Latitude: .38,13976 (in decimal degree									
1			ad 1/4S 1/4W in	•	Managareed	Longitude: 097.88	Longitude: 097.88966 (in decimal degrees)		
'''	111 33011 0	x i idiotoc	17-10 17-10 III	Elevation: 1595	Elevation: 1595				
A 777			odar rangianduru udgurus se ada kanasayaan qayan sayan ada ganasayaa, aray Y. W. Y. W. Y. W.			Datum: WGS 8	4, 🔲 NAD 83, 🛭	] NAD 27	
1		ELL OW	La Compani			Collection Method:			
RR#, Street Address, Box #: 1226 Cherokee Rd. City, State, ZIP Code : Inman Kansas 67546						☑ GPS unit (Mal	GPS unit (Make/Model: Garmin 62S Digital Map/Photo, Topographic Map, Land Survey		
City	, State, Z	AP Code	: Inman,	Kansas 67546		☐ Digital Map/Ph	oto, Z Topographi	ic Map, Land Survey	
2 100	A PRIME WELTH	TY I				Est. Accuracy:     <	3 m, <b>∠</b> ] 3-5 m, ∟	] 5-15 m, □ >15 m	
1	CATE WE 'H AN "X	T I	A DEPTH OF	COMPLETED WE	TT 77	ft			
1	TION BO	(X" IN 4 DEPTH OF COMPLETED WELL 77							
SEC	Depth(s) Groundwater Encountered (1)								
r	Pump test data: Well water wasft. afterhours pumping								
	FOT VITELD								
w  N	100 100 100 100 100 100 100 100 100 100								
W	WELL WATER TO BE USED AS: Public water supply Geothermal Injection well								
		_	☐ Domestic					Other (Specify below)	
S	W   S	E	☐ Irrigation	☐ Industrial ☐	Domestic-la	wn & garden $\square$ Mo	onitoring well S	tock	
L			Was a chemical	bacteriological sam	nle submitted t	o Department?	Ves V No	************************	
Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted									
	1 mile			fected?  Yes		***************************************			
5 TYPE OF CASING USED: Steel PVC Other									
CASING JOINTS: Glued Clamped Welded Threaded									
Casing diameter .5 in. to .57 ft., Diameter in. to ft., Diameter in. to ft.									
Casing height above land surface. 16 in., Weight 160 lbs./ft., Wall thickness or gauge No214									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)									
SCREEN OR PERFORATION OPENINGS ARE:									
Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)									
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)									
SCREEN-PERFORATED INTERVALS: From									
				From	ft. to	ft., From	ft.	to f	
GRAVEL PACK INTERVALS: From									
From									
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other									
Grout I	ntervals:	From		) ft., Fr	om	ft. to ft.,	From	ft. toft	
			of possible conta		J	[*****	The co		
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☑ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well									
			nes Seepage r	nit	ı 🔲 Fuel storaş 🔲 Fertilizer s				
						from well			
FROM			LITHOLOG		FROM			JGGING INTERVAL	
0	5	Sandy	***				(		
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76	77	Red sh					<u> </u>		
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7 CON	TUD A CT	ODIC OF	T A NIDAWATET	איר איר אירווייייייייייייייייייייייייייי	[ON: TI:		1 1 1		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \( \begin{align*} \text{constructed}, \text{ reconstructed}, \text{ or } \text{plugged} \\									
under my jurisdiction and was completed on (mo/day/year) .2/18/2015 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No134 This Water Well Record was completed on (mo/day/year) .2/23/2015									
Mansas	water W	ch Contr	actor's License N	יטאד Thi z-Remis Ent	s water Well F	tecora was completed	on (mo/day/year		
INSTRI	CTIONS.	Use ty new	riter or hall noint pen	PLEASE PRESS EIDA	MI.Y and PRINT of	by (Signature)	and check the corre	ct answers Sand three con	
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 cop (white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-13									
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. Vi sit us									
http://www.kdheks.gov/waterwell/index.html.									
KSA 82	a-1212					Check: 🕢 W	hite Copy, 🔲 Bl	lue Copy, 🔲 Pink Co	