WATER WELL RECORD	Form W	WC-5	Division of Wat	er Resources App. N	<sub>o.</sub>	
1 LOCATION OF WATER WELL:	Fraction	\ \ \ \	Section Number	Township No.	Range Number	· ·
County: 12000	14 N E 1454		36	T 22 S	R <b>b</b> □E	W
Street/Rural Address of Well Location;			Global Positionin			
from nearest town or intersection: If at owner's address, check here Latitude:						
		Elevation:				
2 WATER WELL OWNER: TE COLA MISSING.			<u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
2 WATER WELL OWNER: Terry 11 255109 RR#, Street Address, Box #: 225 Country 5. de GPS unit (Make/Model:) City. State. ZIP Code GPS unit (Make/Model:) Digital Man/Photo Topographic Man Land Survey						
City, State, ZIP Code Digital Map/Photo, Dropographic Map, Land Survey						urvey
Est. Accuracy:   <3 m,   3-5 m,   5-15 m						
3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF	COMPLETED WEI	л З'	<u> </u>			
SECTION BOX: Depth(s) Groundwater Encountered (1)						
SECTION BOX:  Depth(s) Groundwater Encountered  WELL'S STATIC WATER LEVEL.  The below land surface measured on mo/day/yr.						
Pump test data: Well water was\tt. after hours pumping\ gpm						
WNW NE E EST. YIELD						
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well						
Domestic Dendlet Dillfold water gumly Devetoring Dether (Specific below)						
SW - SE -   Domestic Feedion   Domestic lawn & garden   Monitoring well   Cliff (Specify below)						
Was a chemical/bacteriological sample submitted to Department?  Yes No						
S If yes, mo/day/yr sample was submitted						
			11 (1)			
5 TYPE OF CASING USED: Steel PVC Other Other Worlded Threeded						
CASING JOINTS: A 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 wrapped Saw cut Cother (specify)						
Louvered shutter						
From						
From						
Grout Intervals: From						
What is the nearest source of possible conta	mination:			,		
_ <u> </u>	es Pit privy	Livestock 1			er (specify below)	
Sewer lines Cesspool Watertight sewer lines Seepage p	Sewage lagoon	☐ Fuel storag		d water well		
Direction from well	it ☐ Feedyard		torage U Qil well/g from well	as well	•••••	
FROM TO LITHOLOG		FROM		OG (cont.) or PLU	GGING INTERV	VALS
0 5 Rlack 1)	at					
	nd clay					
10 18 FINL SUY	X					
18 34 Dea Size	icavul					
1	<u> </u>					
	* ***	<del> </del>		· · · · · · · · · · · · · · · · · · ·		
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) 323 and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No						
under the business name of Lower State Line by (signature) by (signature) lower the business name of Lower State Line by (signature) by (signature) by (signature) lower the business name of Lower State Line by (signature) by (signature) lower the business name of Lower State Line by (signature) lower the lower the business name of Lo						
(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 785-296-5522. 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						0,1