WATER WELL RECORI	For	Form WWC-5		er Resources App. No). L
1 LOCATION OF WATER V	1/25W	14NE 14NW 1/4	Section Number	Township No. T S	Range Number R
Street/Rural Address of Well Location; if unknown, distance & direction			Global Positioning		formation:
from nearest town or intersection: If at owner's address, check here			Latitude:		
			Longitude: (in decimal degrees) Elevation:		
1. WATER WELL OWNER OF SCA. BOX AT			Datum: WGS 84, NAD 83, NAD 27		
RR# Street Address Roy #:			Collection Method:		
2 WATER WELL OWNER: BOX #: RR#, Street Address, Box #: City, State, ZIP Code :			☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey		
17 × tC	rinson, KS	61502		3 m, ☐ 3-5 m, ☐	
3 LOCATE WELL WITH AN "X" IN 4 DE	DTU OF COMDUETE	WELL 3.7)		
WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL ft. Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft.					
WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr					
Pump test data: Well water wasft. afterft. hours pumping 25g					
EST. YIELDgpm Well water wasft. after hours pumping					ping gpm
W E Bore Hole Diameter					
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well Domestic Feedlot Oil field water supply Dewatering Other (Specify below)					
SW SE					
Was a chemical/bacteriological sample submitted to Department? Yes No					
S If yes, mo/day/yr sample was submitted					
water well distillected: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
5 TYPE OF CASING USED: Steel PVC Other					
Casing diameter in to ft Diameter in to ft					
Casing diameter					
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 ft. to ft.					
Fromft. to					
From					
From					
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other					
Grout Intervals: From					
☐ 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 Direction from well			6mm	is well	
	ITHOLOGIC LOG	FROM			GGING INTERVALS
0 5 5050				/ / =	
	Sandy CIAN	\			
, ,	1 h	,			
16 32 Peas:	u gravi				
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) and this record is true to the best of my knowledge and belief.					
Kansas Water Well Contractor's	License No. 15	This Water Well R	ecord was completed	l o n (m o/day/year)	146-13
under the business name of).U.
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 of					