WATER WELL RECORD Form WWC-5 Division of Water												
				ge in Well Use	R	esour	ces App. No		Well ID			
1 LOCATION OF WATER WELL:						n Number 28	Township Numl					
	y: Stafford			1/4 SW 1/4 SE 1/4	1/4 SW 1/4 SE 1/4 SW 1/4			T 23 S		4 🗀 E 📰 W		
	OWNER: 1			First:	Street or l	Rural	Address where well is located (if unknown, distance and					
		amily Trust		direction from n			earest town or intersection): If at owner's address, check here:					
Address: Address:	668 NVV	40th Street			5 3/4 West o			St John				
City:	St. John		State: KS	ZIP: 67576								
3 LOCATE WELL WITH 8Y IN 4 DEPTH OF COMPLETED WELL: 80. ft. 5 Latitude: 38.01565 (decimal degree												
WITH "		1			ncountered: 1)							
	ON BOX:			3) ft., or 4) [			Horizontal Datum: ☐ WGS 84 ■ NAD 83 ☐ NAD 27					
: :	v.	WELL'S S	WELL'S STATIC WATER LEVEL: 42					for Latitude/Longitude		05 LI NAD 27		
		below !	below land surface, measured on (mo-day-yr)				GPS (unit make/model:)					
NW	NE	above 1	above land surface, measured on (mo-day-yr).				_	(WAAS enabled? [				
			Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map					
W E afte			after hours pumping g Well water was ft.			Online Mapper:						
SW	SE	after	after hours pumping gpi									
L X		Estimated Y	Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TO					
	S Bore Ho			e Hole Diameter:10 in. to80						GPS Topographic Map		
	nile			in. to	ft.			☐ Other				
7 WELL WATER TO BE USED AS:												
1. Domestic		5.	Public Water Supply: well ID				10. Oil Field Water Supply: lease					
			6. Dewatering: how many wells?						vell ID			
				Recharge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores?					
					Remediation: well ID			a) Closed Loop   Horizontal   Vertical				
3. ☐ Feedlot ☐ Air Sparge							b) Open Loop Surface Discharge Inj. of Water					
4. 🗌 Indust	rial		Recovery					er (specify):				
Was a chemical/bacteriological sample submitted to KDHE?   Yes No If yes, date sample was submitted:												
Water well disinfected? ■ Yes □ No												
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other												
Casing diameter 5 in to 80 ft., Diameter in to ft., Diameter in to ft. Diameter in to ft. Casing height above land surface 18 in Weight SDR-26 lbs/ft. Wall thickness or gauge No.												
Casing height above land surface 18 in Weight SUK-26 lbs./ft. Wall thickness or gauge No.												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel     ☐ Stainless Steel     ☐ Fiberglass     ☐ PVC     ☐ Other (Specify)       ☐ Brass     ☐ Galvanized Steel     ☐ Concrete tile     ☐ None used (open hole)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:												
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ■ Saw Cut ☐ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From80. ft. to60. ft., From ft. to ft., From ft. ft.												
GRAVEL PACK INTERVALS: From 80 ft. to 20 ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Nearest source of possible contamination:  ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage												
Sewer			Laterat Line Cess Pool	_ ,	agoon	_	vestock Pen	_	icide Storage			
☐ Sewer Lines     ☐ Cess Pool     ☐ Sewage Lagoon     ☐ Fuel Storage     ☐ Abandoned Water Well       ☐ Watertight Sewer Lines     ☐ Seepage Pit     ☐ Feedyard     ☐ Fertilizer Storage     ☐ Oil Well/Gas Well												
Other (Specify) House.  Direction from well? Southeast Distance from well? 200 ft.												
Direction fro		Southeast		Distance from w	/ell?200	)		f	t.			
10 FROM	ТО	·	ITHOLO	GIC LOG	FROM		I OT	ITHO. LOG (cont.) c	r PLUGGIN	G INTERVALS		
0		Top soil										
3		Sandy brow				$\perp$						
41		Small grave	, fine san	id. w/ heavy		_						
58		clay streaks	II ma = =1					,				
58		Gravel- sma	ii med			-						
75	80	Tan clay			B.1 :							
	-				Notes:							
11 CONT	PACTOD	SORIANDA	WMED!	S CERTIFICATION	N. This	ater :	vell was	constructed [ roa	onetruoted	or I plugged		
under my i	urisdiction a	ind was comp	leted on (r	no-day-year) 7-2-	19a	nd thi	is record is	true to the best of n	ny knowled	ge and belief.		
Kansas Wa	ater Well Co	ntractor's Lic	ense No	13.4 This W	ater Well I	Recor	d was com	pleted on (mo-day-y	year)71.	8-19		
under the b	ousiness nam	ie ofRΩse	ncrantz <del>.</del> .	Bemis Ent Inc		.Sign	ature	Chan. Chlish				
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.												
								e tor your records. Telep		-5524. <b>1 7/10/2015</b>		
Visit us at		S. 15 11 11 11 11 11 11 11 11 11 11 11 11	ist i i		KSA 82a	-1412	<u> </u>		1/CA1260	1/10/2013		