			n WWC-5		ivision of Water					
			ange in Well Use		sources App. No.		Well ID			
1 LOCATION OF WATER WELL:			Fraction					e Number		
County: Pawnee ¼ NW ¼ SE !					32					
2 WELL OWNER: Last Name: Greene First: Mark Street or Rural Address where well is located (if unknown, distance and										
Business:	407.4700			direction from	rection from nearest town or intersection): If at owner's address, check here:					
Address: Address:	137 170tl	า. Ave.	h. 1 1/4 east of	1 1/4 east of Garfield						
City:	Confiold	State: K	(s ZIP: 67529	,, , cast s.						
	Garfield	1								
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:								ecimal degrees)		
Depth(s) Groundwater Encountered: 1)										
N 2) tt. 3) tt., or 4)						al Datum: WGS 84	NAD 83	3 🗆 NAD 27		
WELL'S STATIC WATER LEVEL:					Source fo	Source for Latitude/Longitude:				
			ace, measured on (mo-da	y-yr)!&-%95.!	GPS	GPS (unit make/model:)				
			ace, measured on (mo-daged)		1	(WAAS enabled? ☐ Yes ☐ No)				
			ours pumping			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
			ell water was							
SW SE after hour			ours pumping							
^		Estimated Yield:	Estimated Yield:gpm			6 Elevation:				
S Bore Hole Di		Bore Hole Diameter	r:10 in. to70	ft. and	_	Source: Land Survey GPS Topographic Ma				
1 n	nile	1	in. to	ft.						
7 WELL WATER TO BE USED AS:										
1. Domestic: 5. Public Water Supply: well ID										
☐ Housel		6. 🗌 Dewat	ering: how many wells?		11. Test Hole: well ID					
☐ Lawn d	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID				Cased Uncased Geotechnical					
	■ Livestock 8. Monitoring: well ID									
	2. Irrigation 9. Environmental Remediation: well ID					a) Closed Loop				
3. Feedlot Soil Vapor Extraction						b) Open Loop Surface Discharge Inj. of Water				
4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (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 70 ft. Diameter in to ft. Diameter in to ft.										
Casing height above land surface										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)										
☐ 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: From .65 ft. to .45 ft. From ft. to ft. From ft. to ft.										
GRAVEL PACK INTERVALS: From										
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 Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well										
				Jagoon	☐ Fertilizer Stora			CII		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) .None										
Direction from well? Distance from well? ft.										
10 FROM	TO		LOGIC LOG	FROM		ITHO. LOG (cont.) or P	LUGGING	INTERVALS		
0		Top soil				· · · · · · · · · · · · · · · · · · ·				
3	10	Brown clay								
10	23	Soft sandy brown	clav							
23	30	Fine sand				771.				
30	65	Sand & gravel-sma	all medium coarse							
30		clean	an, modium, oodise		1					
65	70	Tan clay	· · · · · · · · · · · · · · · · · · ·	Notes:						
00	10	i aii olay		110163.						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged										
under my jurisdiction and was completed on (mo-day-year) .12-29-16 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo-day-year) 1-11-17										
under the business name of Rosencrantz-Bernis Signature Signature										
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.										
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015										