WATER WELL RECORD		Form V	WWC-5	Division of Wate	r Resources App. No).	
1 LOCATION OF WATER WELL:		Fraction	11,4 581/4	Section Number	Township No.	Range Number	
Street/Rural Address of Well Location;					T 23 S	R 2 □E XW	
			Global Positioning				
from nearest town or intersection: If at owner's address, check here				Latitude: (in decimal degrees) Longitude: (in decimal degrees)			
,				Elevation:			
2 WATER WELL OWNER: Carrie Bridge RR#, Street Address, Box #: 1418 Chest nut St City, State, ZIP Code				Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
RR#, Street Address, Box #:				Collection Method: GPS unit (Make/Model:)			
City, State, ZIP Code : Wal stead K				☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
2 LOCATE WELL	Was	stead, K	<u>/</u>	Est. Accuracy:	3 m, 🔲 3-5 m, 🔲	5-15 m,	
3 LOCATE WELL WITH AN "X" IN	4 DEPTH OF	COMPLETED WE	ll8.8	ft.			
SECTION BOX:							
N WELL'S STATIC WATER LEVEL28ft. below land surface measured on mo/day/yr							
Pump test data: Well water wasft. after							
W NW NE			er				
	WELL WATER	TO BE USED AS:	☐ Public wat	ater supply Geothermal Injection well			
SWSE Domestic Feedlot Oil field water supply Dewatering Other (Specify bel							
Irrigation							
Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted							
1 mile Water well disinfected? Yes \[\subseteq \ No							
5 TYPE OF CASING USED: Steel X PVC Other							
CASING JOINTS: ☑ Glued ☐ Clamped ☐ Welded ☐ Threaded							
Casing diameter ft., Diameter in. to ft., Diameter ft., Diameter ft.							
Casing height above land surface							
Steel Stainless Steel TYPE OF SCREEN OR PERFORATION MATERIAL: Other (Specify)							
Brass Galvanized Steel None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
☐ Continuous slot							
Louvered shutter Key punched Wire wrapped Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.							
From							
GRAVEL PACK INTERVALS: From							
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From							
What is the nearest source of possible contamination:							
☐ Septic tank ☐ Lateral lin ☐ Sewer lines ☐ Cesspool		es Pit privy Sewage lagoon	Livestock p			er (specify below)	
☐ Watertight sewer l	ines 🔲 Seepage p		Fertilizer s				
Direction from well		4 7		from well			
FROM TO	LITHOLOG	IC LOG	FROM	TO LITHO. LO	OG (cont.) or PLU	GGING INTERVALS	
3 12 8	hus						
18 88 med	d Sand						

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 7 and this record is true to the best of my knowledge and belief.							
under my jurisdiction and was completed on (mo/day/year)							
under the business name of							
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the forrect 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 785-296-5522. 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							