| WATEI | R WELL | RECOR | D | Form WWC- | 5 | Division | of Wate | r Resources; | App. No. | | | | |
|--|--|--|--------------------------------------|---------------------------------------|-------------|--------------------------|---------------|---------------|---|----------|-------------|-------|--|
| | _ | F WATER | | Fraction | | | | Township | | | | | |
| | ty: R | eno | | NW1/4 SW 1/4 N | 11:5 | 18 | | T 23 | | R | | | |
| | nce and dir | | nearest town or cit | y street address of we | 11 11 | Global Posi Latitude: | U | • | • | - | | | |
| 10040 | | | 1st in Hu | itchinson | | Latitude: Longitude: | | | | | | | |
| 2 WA | | L OWNER | | | | Elevation | : : | | | | | | |
| | , St. Addre | | : 507 E | | İ | Datum: | | | | | | | |
| City, | State, ZIP | Code | : Hutch, K EPTH OF COMP | | Data Coll | lection l | Method: | | | | | | |
| | ATE WEI | LL'S 4 D | ЕРТН ОГ СО́МР | PLETED WELL | 40 | | ft. | | | | | | |
| | ATION | D. D. | th(a) Commendent | Enganistand (1) | | Α , | (2) | Δ. | (2) | | | A | |
| | H AN "X" FION BO | IN Dep | Depth(s) Groundwater Encountered (1) | | | | | | | | | | |
| SEC | N | 1. | Pump test data: Well water was | | | | | | | | | gpm | |
| ГТ | Est. Yieldgpm: Well water wasft. afterhours pumpinggpm | | | | | | | | | | | gpm | |
| WELL WATER TO BE USED AS: 5 Public water supply NW NE E WELL WATER TO BE USED AS: 5 Public water supply 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) | | | | | | | | | | | | | |
| w | | $E \mid 1 D$ | omestic 3 Feed | dlot 6 Oil field ustrial Domestic | water su | ipply | 9 Dew | atering | 12 Ot | | | | |
| | | | rigation 4 indi | ustriai y Domesti | c (lawii c | x garden) | 10 MOI | illoring wei | 1 | ••••• | | | |
| SW | / SE - | - SE Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs | | | | | | | | | | | |
| | Sample was submitted | | | | | | | | | | | | |
| s | | | | | | | | | | | | | |
| 5 TYPE | OF CAS | ING USED | 5 Wrought I | ron 8 Conce Cement 9 Other | rete tile | | CASING | G JOINTS: | Glued | K Clam | ped | | |
| 15 | Steel | 3 RMP (SR |) 6 Asbestos- | Cement 9 Other | (specify | below) | | | Welded | | • • • • • • | | |
| Plank or | PVC | 4 ABS | 7 Fiberglass | ft., Diameter | | in to | | Diameter | 1 nreaded | in to | | | |
| | | | | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | | | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass | | | | | | | | | | | | | |
| 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) | | | | | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) | | | | | | | | | | | | | |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped Saw cut 10 Other (specify) | | | | | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | | | | | |
| From | | | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | | | | |
| From | | | | | | | | | | | | | |
| 6 GRO | 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other | | | | | | | | | | | | |
| Grout In | | | | 2.2 ft., From | | ft. to | fi | t., From | • | ft. to . | | ft. | |
| | the nearest Septic tank | | ossible contaminati 4 Lateral lines | | Λ Livest | ock pens | 13 Inc | secticide sto | rage | 16 Other | (enec | rify | |
| | Sewer lines | | | 1 0 | 1 Fuel s | • | | oandoned w | _ | below | | ,11 y | |
| \mathfrak{G} | Watertight | sewer lines | 6 Seepage pit | 9 Feedyard 1 | | zer storage | | l well/gas w | | | _ | | |
| | | 1? .// | | | | y feet? | . 6 .? | | | | | | |
| FROM | TO | | LITHOLOGIC | | FROM | I TO | | PLUGO | SING INT | ERVALS | | | |
| 0 | 16 | 5,1/42 | Sand + G | rave/ | | + - | | | | | | | |
| 16 | 43 | Sana | d + Grav | <u>e</u> / | | | | | | | | | |
| | | | | | | | | | *************************************** | | | | |
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| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ①constructed, (2) reconstructed, or (3) plugged | | | | | | | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) . 5 | | | | | | | | | | | | | |
| Kansas Water Well Contractor's License No | | | | | | | | | | | | | |
| under the business name of Miller Drilling by (signature) will | | | | | | | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson Sc., Suite 420, Topeka, Kansas 66612-1367. Telephone | | | | | | | | | | | | | |
| 785-296-5 | 522. Send | one to W | ATER WELL OWN | ER and retain one for | r your r | ecords. Fee | e of \$5. | 00 for each | constructe | d well. | | us at | |
| http://www | w.kdheks.gov | /waterwell/inde | ex.ntml. | | | | | | | | | | |