WATER WELL	RECORD Form	WWC-5	Div	ision of Water				
Original Record		nge in Well Use		ources App. No	1	Well ID		
1 LOCATION OF	WATER WELL:	Fraction	<del></del>	tion Number				
County: Reno		NE 1/4 NE 1/4 SE		12	T 23 S	R 5 □E ■ W		
	: Last Name: Russell	First: Kayla				C T T T T		
Business:	direction from	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:						
Address:								
Address: 707 N. Kent Rd.								
City: Hutchir	ison State: Ks	s. ZIP: 67501						
3 LOCATE WELL	A DEPTH OF CO	AADI ETED WELL	60 0		20.00007			
WITH "X" IN								
SECTION BOX: Depth(s) Groundwater Encountered: 1)				i Dongress and desired				
N		ATER LEVEL:		Horizon	ntal Datum: WGS 84	🗆 NAD 83 🔳 NAD 2		
		bus 1 Source to Eatifude/Longitude.						
	below land surface, measured on (mo-day-							
NW NE	Pump test data: Well water was			(				
w after hours pumping			anm	☐ Land Survey ■ Topographic Map ☐ Online Mapper:				
Wall water was				LI On	line Mapper:			
SW SE -		ars pumping						
Estimated Yield: gpm			· Spin	6 Elevation: 1557ft. ■ Ground Level □ TO				
S Bore Hole Diameter:10 in. to 68			ft and	Source: Land Survey GPS Topographic Ma				
1 mile  in. to				Other				
7 WELL WATER TO BE USED AS:								
1. Domestic:		Vater Supply: well ID		10 🗆 Oil	Field Water Supply: Jeas	۵		
Household								
Household  6. □ Dewatering: how many wells?  7. □ Aquifer Recharge: well ID				. Cased Uncased Geotechnical				
Livestock								
2. Irrigation 9. Environmental Remediation: well ID				a) Closed Loop  Horizontal  Vertical				
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E				b) Open Loop Surface Discharge Inj. of Water				
4. ☐ Industrial ☐ Recovery ☐ Injection				13. 🗍 Oth	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 CASIN	G OSED: U Steel E P	VC U Other	CASII	AG JOINTS:	☐ Glued ☐ Clamped [	_ Welded _ Threadec		
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 5 in to 38 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 18 in Weight 160 lbs./ft. Wall thickness or gauge No. 214.								
Casing neight 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: From38 ft. to48 ft., From ft. to ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From 68 ft. to								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possible contamination:								
Septic Tank								
☐ 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) Direction from well? West Distance from well? 11 ft.								
10 FROM TO		OGIC LOG	FROM		JTHO, LOG (cont.) or Pl	LIGGING INTERVAL		
		AGIC EOG	1 KOW	10 1	ATTIO, LOG (COIII.) OF FI	COOGING INTERVAL		
0 4	Sandy top soil							
4 12	Tan clay		<del></del>					
12 25	Tan clay, fine sand r							
25 45	Tan clay-soft, fine sa							
45 60	Tan clay, fine sand r	nix						
60 68	Tan clay							
		Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugge								
under my jurisdiction and was completed on (mo-day-year) .8/9/2016 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) 8/15/2016 under the business name of Rosencrantz-Bemis Ent								
under the business na	me of Rosengrantz-B	emis Ent	Si:	enature 🧘	L'A ALL			
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								