

WATER WELL RECORD Form WWC-5

Original Record Correction Change in Well Use

Division of Water Resources App. No.

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South Well

Well ID

1 LOCATION OF WATER WELL: County: Reno	Fraction NE 1/4 NW 1/4 NW 1/4 NE 1/4	Section Number 12	Township Number T 23 S	Range Number R 6 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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2 WELL OWNER: Last Name: Trinity United Methodist Church Business: Trinity United Methodist Church Address: 1602 North Main Address: City: Hutchinson State: KS ZIP: 67501	First: _____ 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: <input checked="" type="checkbox"/>
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3 LOCATE WELL WITH "X" IN SECTION BOX:

N

-- NW --	-- NE --
-- SW --	-- SE --

S

----- 1 mile -----

4 DEPTH OF COMPLETED WELL: **52** ft.

Depth(s) Groundwater Encountered: 1) ft.
 2) ft. 3) ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL: **12** ft.
 below land surface, measured on (mo-day-yr)
 above land surface, measured on (mo-day-yr)
 Pump test data: Well water was ft.
 after hours pumping gpm
 Well water was ft.
 after hours pumping gpm
 Estimated Yield: gpm
 Bore Hole Diameter: **16** in. to **52** ft. and
 in. to ft.

5 Latitude: **38.07143** (decimal degrees)
Longitude: **097.92949** (decimal degrees)
 Horizontal Datum: WGS 84 NAD 83 NAD 27
 Source for Latitude/Longitude:
 GPS (unit make/model: **Garmin 62S**)
 (WAAS enabled? Yes No)
 Land Survey Topographic Map
 Online Mapper:

6 Elevation: **1537** ft. Ground Level TOC
 Source: Land Survey GPS Topographic Map
 Other

7 WELL WATER TO BE USED AS:

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID 6. <input type="checkbox"/> Dewatering: how many wells? 7. <input type="checkbox"/> Aquifer Recharge: well ID 8. <input type="checkbox"/> Monitoring: well ID 9. Environmental Remediation: well ID <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease 11. Test Hole: well ID <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input checked="" type="checkbox"/> Other (specify): Disposal
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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 JOINTS: Glued Clamped Welded Threaded
 Casing diameter **10** in. to **22** ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface **16** in. Weight **160** lbs./ft. Wall thickness or gauge No. **4.13**

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 **22** ft. to **52** ft., From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **52** ft. to **18** ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
 Grout Intervals: From **18** ft. to **0** ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input checked="" type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well

Other (Specify)

Direction from well? **South** Distance from well? **40** ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
		RECONSTRUCTED TO FLUSH MOUNT 1 FOOT BELOW SURFACE			

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) **11-14-2019**... 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) **11-17-2020**..... under the business name of **Rosencrantz-Bemis Ent.** Signature **Agnese Dadaon**