WATER	WELL	RECORD	Form	WWC-5	Div	ision of Water	r	Wall ID	
	Correction Change in Well Use				Keso Sec	Section Number Township Number Range Number			
County FD							T 74 S	$R / 7 \Box E M W$	
2 WELL OWNER: Last Name: Ack First: 2 / Street or Rural Address where well is located (if unknown distance and									
Business:									
Address: 204 EDWArds ST. AT The Address 204 EDWArds ST.									
Address:	10.15		Stata:	5 7ID: 1.7557	North	EAT	Side of How	1500	
3 LOCATI	F WELL	>	State.		<i>A</i> -				
WITH "X" IN 4 DEPTH OF COMPLETED WELL: ft. 5 Latitude:								(decimal degrees)	
SECTIO	SECTION BOX: Depth(s) Groundwater Encountered: 1) ft.						Longitude:		
N	N 2) II. 5) II., of 4)[] Dry well WELL'S STATIC WATER LEVEL 55 ft					Datum	Datum: U WGS 84 U NAD 83 U NAD 27		
			v land surface	measured on (mo-day	V-VT)		for Latitude/Longitude:))	
X	NE	√ abov	e land surface	, measured on (mo-day	y-yr). 1-1		$(WAAS enabled? \square Yes \square No)$		
	1	Pump tes	Pump test data: Well water was ft.				Land Survey Topographic Map		
w		E after	after hours pumping gpr			<u> </u>	Online Mapper:		
- SW	SF		Well water was ft.						
	3E	after	after			6 Elevation:ft. Ground Level TOC			
		Estimated Bore Hol	Bore Hole Diameter: 10 52 in to 82 ft			Source: Land Survey GPS Topographic Map			
1 n	5 nile	Dore not	in to						
7 WELLY	WATER	TO BE USE) AS:						
1. Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease									
☐ Housel	hold	6.	6. Dewatering: how many wells?			11. Test Hole: well ID			
Lawn &	& Garden	7.	7. Aquifer Recharge: well ID			Cased Uncased Geotechnical			
Livesto	Livestock 8. Monitoring: well ID					12. Geoth	12. Geothermal: how many bores?		
2. 🗌 Irrigati	Irrigation 9. Environmental Remediation: well ID					a) Clo	a) Closed Loop [] Horizontal [] Vertical		
3. [] Feedlo	3. Feedlot Air Sparge Soil Vapor Extract					0)0p 13 ⊡ 0rl	b) Open Loop \square Surface Discharge \square inj. of water		
							1 1 1 1	1	
Was a cnemical/bacteriological sample submitted to KDHE? U Yes P No II yes, date sample was submitted:									
Water well	disinfect	ed? Yes			CAST	IC IODITE			
8 TYPE O	F CASE			C U Other					
Casing diameter									
TYPE OF SCREEN OR PERFORATION MATERIAL.									
\Box Steel \Box Stainless Steel \Box Fiberglass \blacksquare PVC \Box 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-P	'ERFOR	ATED INTER	VALS: From	m	e.e. ft., From	ft. to	• ft., From	ft. to ft.	
GRAVEL PACK INTERVALS: From . D. G., ft. to ft., From ft. to ft. to									
9 GROUT MATERIAL: Neat cement Cement grout P Bentonite Other									
Nearest sour	als: From	i and . in Il	10	II., From		II., FIOII	11. 10	11.	
	Tank		Lateral Lin	es 🗆 Pit Privy		Livestock Per	ns 🗌 Insectic	ide Storage	
	Lines	Ī	Cess Pool	Sewage L	.agoon	Fuel Storage	🗌 Abando	ned Water Well	
U Waterti	ight Sewer	Lines [] Seepage Pi	t 🗌 Feedyard		Fertilizer Sto	rage 🗌 Oil Wel	l/Gas Well	
Other (Specify)	00	· a			999	0		
Direction fro	om well? .			Distance from	well?			DI LICCINIC INTERVALO	
10 FROM	10	But	LITHOLO	GIC LOG	FROM	10	LITHU. LUG (cont.) or	r Lugging in i EKVALS	
D	10	BIACK	100 50						
10	15	- yrey	CINY	41		<u>├</u>			
15	20	7 Am	Sandy	CIAY		<u> </u>			
20	30	Fine	I An J	I CAL				· · ·	
20	20	ma	TA S	All Chand		 			
20	29	Ve In	J ALA	and young	Notes				
80	ac yellow chan								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed. Teconstructed. or Dugged									
under my jurisdiction and was completed on (mo-day-year). 7 and this record is true to the best of my knowledge and belief.									
Kansas Wa	ter Well	Contractor's J	icense No.		Vater Well Re	cord was con	nploted on (mo-day-ye	AV. 7-13-1.4	
under the b	usiness n	ame of C	mudiz.	WARTER WA	Al. Durc	Contraction of the second		K	
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constitutive well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Toneka, Kansas 66612-1367. Telenhone (785) 296-3565.									
Visitue	at http://www	w.kdheks.gov/water	vell/index.html	a water, Geology Section, 10	KSA 82a-	1212	, ransas 00012-1507. Telepho	Revised 9/10/2012	
. 1511 45									