| WATER V | | | | WWC-5 | | vision of Water | | Well ID | |
|--|---|--------------------|--|---|--|--------------------------|---|------------------------|--|
| ✓ Original Record □ Correction □ Char 1 LOCATION OF WATER WELL: | | | | Fraction | Resources App. No. Well ID Well ID Section Number Township Number Range Number | | | | |
| County: Edwards | | | | | SW 1/4 | . 28 T 24 S R 19 □ E 🗹 W | | | |
| 2 WELL O | ast Name: Kin | dsvater | | Street or Rural Address where well is located (if unknown, distance and | | | | | |
| Business: Address: 502 N. Massachusetts | | | | | direction from nearest town or intersection): If at owner's address, check here: | | | | |
| Address: | | | | | | | | | |
| | Kinsley | 1 | State: KS | ZIP: 67547 | | | | | |
| 3 LOCATE WITH "X" | | 4 DEPTH | OF COM | IPLETED WELL: | | | | 50 (decimal degrees) | |
| | SECTION BOX: N N Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) | | | | | Longitude: | | | |
| N | | | | TER LEVEL: | | | for Latitude/Longitude | | |
| | | below l | and surface | , measured on (mo-day- | ут) <u>11/27/201</u> | | |) | |
| NW | - NE | | D above land surface, measured on (mo-day-y Pump test data: Well water was ft | | | | (WAAS enabled? [] Yes [] No) | | |
| | W E | | | after hours pumping | | | □ Land Survey □ Topographic Map □ Online Mapper: | | |
| "sw-X- | | Well water was ft. | | | | | | | |
| | - SE | | after hours pumping | | | 6 Elevat | ion: 2169 | . 🗹 Ground Level 🔲 TOC | |
| S | | Bore Hole I | Bore Hole Diameter: 10.5 in. to | | | Source | Source: Land Survey GPS Topographic Map | | |
| 1 mil | | | in. to ft. | | | | Other KOLAR | | |
| 7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease | | | | | | | | | |
| 1. Domestic: | ✓ Household ✓ Dewatering: how many | | | | | | | ease | |
| | Lawn & Garden 7. Aquifer Recharge: well ID | | | | | | | | |
| | Livestock 8. Monitoring: well ID | | | | | | 12. Geothermal: how many bores? | | |
| 2. ☐ Irrigation 3. ☐ Feedlot | Image: | | | | | | a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water | | |
| 4. Industrial | | | □ Recovery □ Injection | | | 13. Other (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 CASING USED: ☐ Steel PVC ☐ Other CASING JOINTS: ☐ Glued Clamped ☐ Welded ☐ Threaded | | | | | | | | | |
| Casing diameter | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | |
| □ 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 | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| Septic Ta | | | Lateral Line | | | Livestock Pen | s 🗆 Insectio | cide Storage | |
| □ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well | | | | | | | | | |
| □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well | | | | | | | | | |
| Direction from well? | | | | | | | | | |
| 10 FROM | TO | I | ITHOLO | GIC LOG | FROM | | | PLUGGING INTERVALS | |
| 0 1 | | OP SOIL, FI | | | | | | | |
| 17 3 | | VITH BROV | | | | | | | |
| | | TAN CLAY | SE SANL |) | | | | | |
| | - | | | | | | | | |
| | | | | | | | | 4n 19 | |
| | Notes: | | | | | | | | |
| | | | | | | | | | |
| 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) <u>11/27/2018</u> and this record is true to the best of my knowledge and belief. | | | | | | | | | |
| Kansas Water Well Contractor's License No. 846. This Water Well Record was completed on (mo-day-year) .1.1/30/20.18 under the business name of Nash Water Well Service, LLC. | | | | | | | | | |
| Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. | | | | | | | | | |
| KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 | | | | | | | | | |