WATER WELL RECORD Form WWC-5					Division of Water 31124 #2				
			ge in Well Use		esources App. No		Well ID		
		VATER WELL:	Fraction		ection Number	Township Number		ge Number	
Count	y: Reno		SW 1/4 SE 1/4 NE 1/4		2	T 24 S		$\Box E \blacksquare W$	
2 WELL OWNER: Last Name: Mattlack First: Street or Rural Address where well is located (if unknown, distance and									
	: Laura El	izabeth Mattlack Collir	ns Trust	direction from nearest town or intersection): If at owner's address, check here:					
Address:									
Address: 1301 A Manchester Rd. From Hwy 50 & Haven Rd. 2S 2 1/4E SSR									
City:	<u> Hutchins</u>	on State: Ks.	ZIP: 67502						
3 LOCAT		4 DEPTH OF CON	MPLETED WELL: .	:32 ft. 5 Latitude: 37.99642 (decimal degrees)					
WITH "			Encountered: 1)						
SECTION BOX.			3) ft., or 4)			Horizontal Datum: WGS 84 NAD 83 NAD 27			
WELL'S STATIC WA								53 ■ NAD 2/	
			, measured on (mo-day-		Source I	Source for Latitude/Longitude: GPS (unit make/model:Garmin 62S)			
						(WAAS enabled? ☐ Yes ■ No)			
NWNE Labove land surface,									
			s pumping			☐ Land Survey ■ Topographic Map			
Welly			water was 1		□ Oni	☐ Online Mapper:			
sw	SE		hours pumping gpm			4.4==			
1 1 1	1 1 1	Estimated Yield:	Estimated Yield:gpm			6 Elevation: 1457ft. ■ Ground Level □ TOC			
	S	Bore Hole Diameter:	Bore Hole Diameter:16 in. to32 ft.			Source: ☐ Land Survey ■ GPS ☐ Topographic Map			
			in. to			Other			
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. Public Water Supply: well ID									
☐ House			ig: how many wells?						
			echarge: well ID			11. Test Hole: well ID			
			g: well ID			12. Geothermal: how many bores?			
2. Irrigat						a) Closed Loop Horizontal Vertical			
3. Feedlo		☐ Air Sparg							
4. Indust		☐ Recovery		Extraction		b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 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 diameter									
Water well disinfected? ■ Yes □ No 8 TYPE OF CASING USED: □ Steel ■ PVC □ Other									
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 ft. to ft., From ft., From ft. to ft.									
G	RAVEL PA	CK INTERVALS: From	n 32 ft to 15	ft From	n flo	ft From	ft to	ft ft	
GRAVEL PACK INTERVALS: From									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic		Lateral Line	es 🔲 Pit Privy	Г	Livestock Pens	☐ Insectic	ida Storaga		
Sewer		☐ Cess Pool	Sewage La		☐ Fuel Storage	☐ Abandor		Well	
					☐ Fertilizer Stora			7011	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well ■ Other (Specify) Plugged Icrigation									
Direction fro	om well?	VE	Distance from wa	 :11? . ノフ・		A			
10 FROM	TO	LITHOLO		FROM		THO. LOG (cont.) or	PLUGGING	INTERVALS	
0	4	Sandy top soil	2.0 200	1 1011	10 12	. 1.10. LOG (voil.) Of	LUCOM	, IIIIII I ALD	
4		Brown clay silty			+		•		
					 	······································			
9		Medfine sand							
31	33	Bluish-green clay		ļ					
		· · · · · · · · · · · · · · · · · · ·		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) .8/2/20.18 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) 8/20/2018.									
Kansas Water Well Contractor's License No. 134									
Mail	1 white conv a	ong with a fee of \$5.00 for each	ch constructed well to: Kar	sas Departme	ent of Health and En	vironment, Bureau of Wa	ter, GWTS S	ection,	
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.									
		s.gov/waterwell/index.html		KSA 82a-		. ,		7/10/2015	
- TOTE GO GETHE	, TO TO MY. RUITOR	C. D. A. TIMEDI TI DIN HIMOA. HIHIII							

Car Markey Service