WATE	R WELL	RECORD	Form '	WWC-5		Division of V	Vater		1			
		☐ Correction	Chang	ge in Well Use		Resources Ap	p. No.	L	☐ Well ID			
I LOCATION OF WATER WELL) Fraction CF					- A11.)	Section Number   Township Number   Range Number						
Coun	ty:	alexande.	15	45E 145L	1/4/4 14/4	14/ 36   T25 S R   DEXW						
2 WELL OWNER: Last Name: Decoco First: Street or Rural Address where well is located (if unknown, distance and												
Business: direction from nearest town or intersection): If at owner's address, check here:												
Address: 120 m Rod Buel Jame												
Address: Vally Cuntof State: KS ZIP: 67147 120 m Red Bud Jeans												
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL: 45												
WITH		4 DEPTH	I OF COM	IPLETED WELL	i	ft.   5 La	titude	<del>.</del>	,	(decimal degrees		
	SECTION ROX: Depth(s) Groundwater Encountered: 1). 20 ft.							Longitude:(decimal degrees				
	N	2)	ft. 3	3) ft., or 4	)_[_Dry W	ell ja	twn: 🗀	] WGS 84 □ NA	D 83 □ N	IAD 27		
	WELL'S STATIC WATER LEVEL:						Surce for Latitude/Longitude:					
	below land surface, measured on (mo-day- above land surface, measured on (mo-day-						GPS (unit make/model:					
NW-	NE							WAAS enabled? [				
W X	4		Pump test data: Well water was						ograpnic wap			
1	Well water was fi						l Ontin	e Mapper:	********	••••••		
SW	after hours pumping							early part comment of the category		and a second members of the first		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						6 Elevation:					
	S Bore Hole Diameter:							Land Survey				
[ ] In, to It.												
7 WELL WATER TO BE USED AS:												
1. Domestic				ter Supply: well ID.		10. 🗀		eld Water Supply: 1				
	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID					
	Lawn & Garden 7. Aquifer Recharge: well ID						☐ Cased ☐ Uncased ☐ Geotechnical					
Livest				g: well ID				al: how many bore				
2. Irrigat 3. Feedle				Remediation: well				Loop Horizon				
4. Indust			] Air Sparge	•	r Extraction			Loop Surface D				
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												
Casing height above land surface in. Weight ibs/ft. Wall thickness or gauge No. 100.												
Steel Stainless Steel Fiberglass VC Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
☐ Continuous Slot												
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Savy Cut □ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From 35 ft. to 45 ft., From ft. to ft. to ft.												
GRAVEL PACK INTERVALS: From ft. fo ft. from ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
		le contaminati		,	.,	,						
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage												
Sewer			Cess Pool	Sewage I		☐ Fuel Stora			oned Water V	/ell		
Watertight Sewer Lines Seenage Pit Feedyard Fertilizer Storage Oil Well/Gas Well												
Direction from well? Distance from well?												
		whom the								TAPPEDMALE		
10 FROM	TO	L	<u>ітногос</u>	ic log	FROM	1 TO	LIT	HO. LOG (cont.) or	PLUGGING	INTERVALS		
0	1/_	100		ely	0	7	-					
-//_	73		ino	10219 -	CAR TO		+					
2-3	45	\ <del>&lt;2</del> C2	يمدي	- kz-z-	- 12		-					
							-					
							-					
· · · · · · · · · · · · · · · · · · ·					Notes							
11 CONT	RACTOR'	S OR LANDO	WNER'S	CERTIFICATIO	N: This y	ater-well was	K)co	nstructed, [] reco	onstructed, o	r [] plugged		
under my j	urisdiction a	nd was compl	cted on (mg	o-day-year)	/5/: [.]	and this record	r is tru	e to the best of m	y Kilowiedgi	2075		
Kansas wa	iter well Co	ntractor symice	inse No,1	I TIS W	ater weil-	Kecora was	pomple	ica on (mo-day-y	valj ænt			
under the D	USHICSS DAM	COI offe Swarf.	CXI.TTPNOW	27 f	www.manale.	showit for a fee to			th one (white) co	ny to Kansas		
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas 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.kdhcks.gov/waterwell/index.html  KSA 82a-1212  Revised 9/10/2012												