WATER	WELL R	ECORD	Form \	WWC-5	Divi	sion of Water		MWa		
	l Record			e in Well Use		urces App. No.		Well ID		
		ATER WEI	LL:	Fraction		tion Number	Township Numb			
County	y: Reno			NE¼ NE¼ SE¼		5	T 25 S	R 4 □E ■W		
	OWNER: L		_	First:	Street or Rur	al Address wl	nere well is located	(if unknown, distance and		
Business: Mid Kansas Cooperative direction from nearest town or intersection): If at owner's address, check here:										
Address: 112 west 2nd street Address:										
City: Haven State: KS ZIP:										
3 LOCAT		1				1	07.0044	20		
WITH "				IPLETED WELL: .		5 Latitude: 37.901129 (decimal degrees)				
	N BOX:			Encountered: 1)		Longitude: -97.784675 (decimal degrees)				
N 2) ft. 3) ft., or 4) [Dry						Horizontal Datum: ■ WGS 84 □ NAD 83 □ NAD 27				
	WELL'S STATIC WATER LEVEL:NA ■ below land surface, measured on (mo-day-yr)						Source for Latitude/Longitude:			
	'_					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)				
NW	above land surface, measured on (mo-day-					(
$ \mathbf{w} $	after hours pumping gpm					☐ Land Survey ☐ Topographic Map ☐ Online Mapper: Google Earth				
	Well water was ft									
SW-	SE		after hours pumping gpr			(Flooring NA A Committee of Too				
		Estimated Y	Estimated Yield:			6 Elevation: NAft. Ground Level TOC				
S Bore Hole Di			Diameter:	3.25 in. to 34	. ft. and	Source: Land Survey GPS Topographic Map Other				
1 mil. 0										
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID										
1. Domestic										
	noid & Garden			g: how many wells?			Hole: well IDased ☐ Geotechnical			
Livest		/· L	Monitorin	echarge: well IDg: well IDMV	W-9 12. Geothermal: how many bores?					
2. Irrigati							a) Closed Loop Horizontal Vertical			
3. Feedlo			Air Sparge					ischarge Inj. of Water		
4. 🔲 Indust		_	Recovery							
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 1 in to 19 ft Diameter in to ft Diameter in to ft Diameter in to ft.										
Casing diameter 1 in. to 19 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 0 in. Weight lbs./ft. Wall thickness or gauge No. Sch 40										
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 19 ft. to 34 ft., From ft. to ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From 17 ft. to 34 ft., From ft. to ft., From ft. to ft.										
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other										
Nearest source of possible contamination:										
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage										
Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well										
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
Direction from well?										
10 FROM	ТО		LITHOLO	GIC LOG	FROM	TO L	ITHO. LOG (cont.)	or PLUGGING INTERVALS		
0		Sand and g					W. J. 44 4 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
3				dry to moist, tr silt						
10		Silty Clay, li								
27	34	Clay, light re	ed brown,	wet, silty						
				-41,4						
					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) 9/6/2018 and this record is true to the best of my knowledge and belief.										
Kansas Water Well Contractor's License No. 604 This Water Well Record was completed on (mo-day-year)										
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.										
					, , ,,		,	Revised 7/10/2015		