| WATER WELL R   | ECORD Form WWC-5 Correction Change in Well Use |  | Division of Water<br>Resources App. No. |           | Well ID                  |  |                           |  |  |
|--|--|--|---|-----------|--------------------------|--|---------------------------|--|--|
| 1 LOCATION OF W  |  |  | ction                                   |           | tion Number              | <u>.                                    </u>           |                           |  |  |
| County: Sida   |  | SE   | 4NE 4 NW4                               |           | 33                       | T 26 S   | R 2 □E ☑W                 |  |  |
|  |  |  |   |           | al Address w             | here well is located                                   | (if unknown, distance and |  |  |
| Business: 21.11  |  |  |   |           |                          |  |                           |  |  |
| Business: 3440 N. Forrest Midge Cf direction from nearest town or intersection): If at owner's address, check here:  |  |  |   |           |                          |  |                           |  |  |
| Address: City: Withi   | ta   | State: (\S ZII   | . 107205                                |           |                          |  |                           |  |  |
| 3 LOCATE WELL  | I .  |  |   | 110       | T                        |  |                           |  |  |
| WITH "X" IN  |  |  | ETED WELL: .                            |           | 1                        |  | (decimal degrees)         |  |  |
| SECTION BOX:   | Depth(s) Groundwater Encountered: 1)           |  |   |           |                          |  |                           |  |  |
| N  | 2)   | 2) ft. 3) ft., or 4) □ Dry Well<br>WELL'S STATIC WATER LEVEL:/.9 |   |           |                          |  |                           |  |  |
|  | MELL 331                                       | below land surface, measured on (mo-day-yr)?.                    |   |           |                          | Source for Latitude/Longitude:  GPS (unit make/model:) |                           |  |  |
| NW-4NE   | above land surface, measured on (mo-day-yr)    |  |   |           | (WAAS enabled?  Yes  No) |  |                           |  |  |
| NW INE   | Pump test d                                    | Pump test data: Well water was ft                                |   |           |                          | ☐ Land Survey ☐ Topographic Map                        |                           |  |  |
| w E  | after  | hours pum  | ping                                    | gpm       |                          | Online Mapper:   |                           |  |  |
| SW SE  | after hours pumping                            |  |   |           |                          |  |                           |  |  |
| J. J   | after  |  |   |           | 6 Elevati                | 6 Elevation:ft. Ground Level TOC                       |                           |  |  |
| S  | Bore Hole Diameter: // in. to ft. and          |  |   |           |                          | Source: Land Survey GPS Topographic Map                |                           |  |  |
| 1 mile   | Dore Hole I                                    |  | in. to                                  | _         |                          |  |                           |  |  |
| 7 WELL WATER TO BE USED AS:  |  |  |   |           |                          |  |                           |  |  |
| 1. Domestic:   |  |  | upply: well ID                          |           | 10. 🔲 Oil                | Field Water Supply: 1                                  | ease                      |  |  |
| ☐ Household  |  |  | ow many wells?                          |           |                          | ole: well ID   |                           |  |  |
| A awn & Garden   |  |  | ge: well ID                             |           |                          | ed Uncased U   |                           |  |  |
| Livestock  |  |  | ell ID                                  |           |                          | ermal: how many bore                                   |                           |  |  |
| 2. Irrigation  |  |  | mediation: well II  ☐ Soil Vapor!       |           |                          | sed Loop  Horizon                                      | ischarge Inj. of Water    |  |  |
| 3.  Feedlot 4.  Industrial   | <u> </u>                                       | Recovery   | ☐ Soil Vapor                            | EXHICTION |                          |  | ischarge [] mj. or water  |  |  |
| Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:   |  |  |   |           |                          |  |                           |  |  |
| Was a chemical pacteriological sample submitted to KDHE?  Yes  W No 11 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  |  |  |   |           |                          |  |                           |  |  |
| Casing height above land surface   |  |  |   |           |                          |  |                           |  |  |
| 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 Wranned □ Saw Cut □ None (Onen Hole)   |  |  |   |           |                          |  |                           |  |  |
| SCREEN-PERFORATED INTERVALS: From 45 ft. to 60 ft., From ft. to ft., From ft. to ft.   |  |  |   |           |                          |  |                           |  |  |
| SCREEN-PERFORATED INTERVALS: From  |  |  |   |           |                          |  |                           |  |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other   |  |  |   |           |                          |  |                           |  |  |
| Grout Intervals: From3ft. to29ft., Fromft. toft.   |  |  |   |           |                          |  |                           |  |  |
| Nearest source of possibl  |  | on:<br>Lateral Lines   | ☐ Pit Privy                             |           | Livestock Pen            | e 🖺 Incarti  | icide Storage             |  |  |
| Sewer Lines  |  | Cess Pool  | Sewage La                               |           | Fuel Storage             |  | loned Water Well          |  |  |
| Watertight Sewer Lines   | _  | Seepage Pit  | ☐ Feedyard                              |           | Fertilizer Stor          |  | ell/Gas Well              |  |  |
| Other (Specify)  |  |  |   |           |                          |  |                           |  |  |
| Direction from well?   | NOTE   |  |   | еп?       |                          | fl   |                           |  |  |
| 10 FROM TO   |  | TITHOFOCIC 1   | LOG                                     | FROM      | TO 1                     | LITHO. LOG (cont.) o                                   | r PLUGGING INTERVALS      |  |  |
| 0 1  | 184  | 5011   |   |           |                          |  |                           |  |  |
| 1 14   |  | 24   |   |           |                          |  |                           |  |  |
| 10 28  | <i>TXV</i>                                     | dercuel  |   |           |                          |  | <u> </u>                  |  |  |
| 28 30  |  | ay Brayla  | T                                       |           |                          |  |                           |  |  |
| 30 60  | 11/  | ech litrave  | <del>\</del>                            |           |                          |  |                           |  |  |
|  |  |  |   | Notes:    | <u>i_</u>                |  |                           |  |  |
| -  | ATORGE   |  |   |           |                          |  |                           |  |  |
|  |  |  |   |           |                          |  |                           |  |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION; This water well was a constructed, reconstructed, or plugged   |  |  |   |           |                          |  |                           |  |  |
| under my jurisdiction and was completed on (mo-day-year)   |  |  |   |           |                          |  |                           |  |  |
|  |  |  |   |           |                          |  |                           |  |  |
| 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   |  |  |   |           |                          |  |                           |  |  |
| INSTRUCTIONS: Send one copy to WAIER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Ransas  Department of Health and Environment. Bureau of Water. Geology Section. 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565. |  |  |   |           |                          |  |                           |  |  |

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Visit us at http://www.kdheks.gov/waterwell/index.html

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