|  | WATER WELL RECORD Form WWC-5  |   | sion of Water  |                                     |  |  |
|--|---|---|----------------|-------------------------------------|--|--|
| County   Secion   County   C   |   |   |                |                                     |  |  |
| Surect or Rural Address where well is located (if whows, dutance and Peters) from the free time of insertation for elements one elements of its owner's address, check here:   | LOCATION OF WATER WELL: Fraction  | Section Section   |                | Township Number                     |  |  |
| Business   Social Wide   Address   Social Well   Social    | 2 WELL OWNER: Leet Name: First:   | Street or Run   |                | here well is located (              |  |  |
| Address   SOCIO   W. Social   SOCIO   W. Social   Socia   | Business: Bachman Homes   | Business: Box c b w c v 1+3 wes direction from peacest town or intersection): If at owner's address check here: |                |                                     |  |  |
| SI   DOTATE WILL   WITH N.   N   Dophic) Groundwater Executioned   1   Dophic) Groundwater Executioned   Dophic) Groundwater Executioned   Dophic) Groundwater Executioned   Dophic) Groundwater Executioned   Dophic) Groundwater   Dophic   Dophic) Groundwater   Dophic) Groundwater   Dophic    | Address:  |   |                |                                     |  |  |
| Secretary   Secr   | Address: John W. Sandkey  |   |                |                                     |  |  |
| Section No.   Comment      | 3 LOCATE WELL   |   |                | · · · · · · · · · · · · · · · · · · |  |  |
| Section No.   Comment      | WITH "X" IN 4 DEPTH OF COMPLETED WELL:  | ft.   | 5 Latitud      |                                     |  |  |
| WELL'S STATIC WATER LEVEL:   //2   ft   bloow lend surface, measured on (mo-day-yr)   whose land surface   whose    | SECTION BOX:  |   | WOMERIN        | ide:                                | (decimal degrees)                        |  |
| Delow land surface, measured on (mo-day-yr).   GPS (unit nask-proache:   Yes   No)   No whose land surface, measured on (mo-day-yr).   GPS (unit nask-proache:   Yes   No)   Land Survey   Topographic Map   Online Mapper:   Topographic Map   Topographic    | WELL'S STATIC WATER LEVEL: 16   |   |                |                                     |  |  |
| Assembler   No.    |   |   |                |                                     |  |  |
| Pump test date: Well water was ft.   | NW NE   above land surface, measured on (mo-day   | -ут)  | 1              | (WAAS enabled? ☐ Yes ☐ No)          |  |  |
| Section   Sect   | Pump test data: Well water was  |   |                | ☐ Land Survey ☐ Topographic Map     |  |  |
| Second   S   | Well water was  |   | Li Onli        | пе Маррег:                          |  |  |
| Stimated Yield:   Ground Level   TICC   Surge:   Land Survey   GPS   Topographic Map   Topographic Map   Topographic Map   GPS   Topographic Map   G   | SWSE after hours pumping  | . gpm   |                |                                     |  |  |
| TWELL WATER TO BE USED AS:   1. Domestic:  | Estimated Yield:gpm   |   |                |                                     |  |  |
| T. WELL WATER TO BE USED AS:   1. Domestic:   5.   Public Water Supply: well ID  | S Bore Hole Diameter:1 in. toI.C.   | ft. and   |                |                                     |  |  |
| 1. Domestic:   5.   Public Water Supply: well   D.   10   Oil Field Water Supply: lease   1. Least Mole: well   D.   1. Least M   |   | Ц.  | <u> </u>       |                                     | ***************************************  |  |
| Household   6.   Dewstering: Now many wells?   11. Test Hole well ID   Cased   Uncased   Geotechnical   Livestock   8.   Monitoring: well ID   12. Geothernical how many bores?   3.   Feedlot   9. Environmental Remediation: well ID   3.   Closed Loop   Horizontal   Vertical   3.   Closed Loop   Horizontal   Vertical   Al roparge   Soil Vapor Extraction   3.   Closed Loop   Horizontal   Vertical   Now many bores?   13.   Other (specify):   Was a chemical/bacteriological sample submitted to KDHE?   Yes   No   If yes, date sample was submitted:   Water well distinfected?   Yes   RNo   S TYPE OF CASING USED:   Steel   RIPVC   Other   CASING JOINTS:   R. Glued   Clamped   Welded   Threaded Casing diameter   Mone   Mon   |   |   | IN ET ON E     | Seld Water Supply: Jean             | 50                                       |  |
| Lown & Garden   .   Aquifer Recharge: well ID     Cased   Uncased   Uncased   Geotechnical   | _ · · · · · · · · · · · · · · · · · · ·   |   |                |                                     |  |  |
| 2. Stringation   9. Environmental Remediation: well ID   | Lawn & Garden 7. ☐ Aquifer Recharge: well ID  |   |                |                                     |  |  |
| 3.   Feedlot       Air Sparge     Soil Vapor Extraction   D) Open Loop     Surface Discharge   Inj. of Water   A   Industrial     Recovery   Injection   D)   Open Loop     Surface Discharge   Inj. of Water   Water well disinfected?   Yes   No   If yes, date sample was submitted:     Water well disinfected?   Yes   No   If yes, date sample was submitted:     Water well disinfected?   Yes   No   If yes, date sample was submitted   Threaded   Casing diameter   Int. or   In   | Livestock 8. Monitoring: well ID  |   |                |                                     |  |  |
| A     Industrial   |   |   |                |                                     |  |  |
| Was a chemical/bacteriological sample submitted to KDHE?   Yes   No   If yes, date sample was submitted:   | 1 - 1 - 3   | Extraction  |                |                                     |  |  |
| Water well disinfected?   Yes  |   |   |                |                                     |  |  |
| Stype of Casing disancter   1  |   | res Kino  | ir yes, date s | ampie was submitted:                | ***************************************  |  |
| Casing diameter in to 35 ft. Diameter in to ft. Diameter in the ft. Diam |   | CASIN   | G IOINTS: I    | M Glued D Clamped                   | □ Wolded □ Threaded                      |  |
| Casing height above fand surface   D   | Casing diameter in to 35 ft Diameter in to ft Diameter in to ft   |   |                |                                     |  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:   Steel   Stainless Steel   Fiberglass   Mail PVC   Other (Specify)   Steel   Concrete tile   None used (open hole)  | Casing height above land surface  |   |                |                                     |  |  |
| Brass   Galvanizzed Steel   Concrete tile   None used (open hole)   SCREEN OR PERFORATION OPENINGS ARE:   Continuous Slot   XI Mill Slot   Gauze Wrapped   Saw Cut   None (Open Hole)   SCREEN-PERFORATED INTERVALS: From   25   | TYPE OF SCREEN OR PERFORATION MATERIAL:   |   |                |                                     |  |  |
| SCREEN OR PERFORATION OPENINGS ARE:    Continuous Stot   | ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)  |   |                |                                     |  |  |
| Continuous Slot   Mill Slot   Gauze Wrapped   Torch Cut   Drilled Holes   Other (Specify)   Convered Shutter   Key Punched   Wire Wrapped   Saw Cut   None (Open Hole)   Saw Cut   |   |   |                |                                     |  |  |
| Louvered Shutter   Key Punched   Wire Wrapped   Saw Cut   None (Open Hole)   SCREEN-PERFORATED INTERVALS: From   |   |   |                |                                     |  |  |
| GRAVEL PACK INTERVALS: From V.I.T. ft. to ft., From ft. to ft. From ft. ft. ft. ft. ft. ft. ft. ft. ft.  | ☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)  |   |                |                                     |  |  |
| GRAVEL PACK INTERVALS: From V.I.T. ft. to ft., From ft. to ft. From ft. ft. ft. ft. ft. ft. ft. ft. ft.  | SCREEN-PERFORATED INTERVALS: From   |   |                |                                     |  |  |
| Grout Intervals: From  | GRAVEL PACK INTERVALS: From   |   |                |                                     |  |  |
| Nearest source of possible contamination:   Septic Tank  |   |   |                |                                     |  |  |
| Septic Tank  |   |   |                |                                     |  |  |
| 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?   Distance |   |   |                |                                     |  |  |
| Watertight Sewer Lines   Seepage Pit   Feedyard   Fertilizer Storage   Oil Well/Gas Well   Other (Specify)   Direction from well?   Distance from well?    |   |   |                |                                     |  |  |
| Direction from well?   |   |   |                |                                     |  |  |
| 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS  3 Top Soil  3 Top Soil  10 35 Cearse fan Sand  10 35 Cearse fan Sand  Notes:  Notes:  11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was kill constructed, or plugged under my jurisdiction and was completed on (mo-day-year) 3 1. 1. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) 3 1. 1  | Uther (Specify)   |   |                |                                     |  |  |
| Notes:  11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ki constructed, or plugged under my jurisdiction and was completed on (mo-day-year) 3  | Direction from well?  |   |                |                                     | LUCCDIC DEFEDUATE                        |  |
| Notes:  Notes: |   | FROM  | _10 LL         | THO. LOG (CORL) OF P                | LUGGING INTERVALS                        |  |
| Notes:    Notes:   No |   |   |                |                                     | <del></del>                              |  |
| Notes:  11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was k constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 3  |   | 1   | <del></del>    |                                     |  |  |
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| Mail I 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.   |   | Notes:  |                |                                     |  |  |
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| 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.   | under the business name of Beardon Pump d. 1  | N.e Sign  | nature .)/     | we Days                             | · 0 10 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |  |
|  |   |   |                |                                     |  |  |
|  | 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Visit us at http://www.kdheks.gov/waterwell/index.html |   |                |                                     | e 785-296-5524.<br>Revised 7/10/2015     |  |