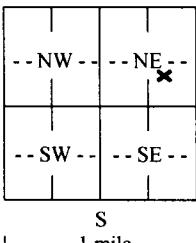


WATER WELL RECORD Form WWC-5

Division of Water

Resources App. No. Well ID

Original Record Correction Change in Well

1 LOCATION OF WATER WELL: Use <input type="text"/> Fraction <input type="text"/> NW <input type="text"/> SE <input type="text"/> NE <input type="text"/> 1/4 <input type="text"/> 1/4		Section Number <input type="text"/> 30	Township Number <input type="text"/> T 26 S	Range Number <input type="text"/> R 1 <input type="checkbox"/> E <input checked="" type="checkbox"/> W	
2 WELL OWNER: Last Name: <input type="text"/> First: <input type="text"/> Business: KLAUSMEYER CONSTRUCTION LLC Address: 10008 W. York Address: City: Wichita State: Kansas ZIP: 67215		Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input type="checkbox"/> 10587 W. Sondra Maize, Kansas 67101			
3 LOCATE WELL WITH "X" IN SECTION BOX: N 		4 DEPTH OF COMPLETED WELL: 70 ft. Depth(s) Groundwater Encountered: 1) <input type="text"/> ft. 2) <input type="text"/> ft. 3) <input type="text"/> ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 25 ft. <input type="checkbox"/> below land surface, measured on (mo-day-yr) 05/06/21 <input type="checkbox"/> above land surface, measured on (mo-day-yr) <input type="text"/> Pump test data: Well water was <input type="text"/> ft. after <input type="text"/> hours pumping <input type="text"/> gpm Well water was <input type="text"/> ft. after <input type="text"/> hours pumping <input type="text"/> gpm Estimated Yield: <input type="text"/> gpm Bore Hole Diameter: 12 in. to 70 ft. and <input type="text"/> in. to <input type="text"/> ft.			
		5 Latitude: 37.76202 (decimal degrees) Longitude: -97.46725 (decimal degrees) Horizontal Datum: <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: <input type="text"/>) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input checked="" type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: <input type="text"/>			
		6 Elevation: <input type="text"/> ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other: <input type="text"/>			
7 WELL WATER TO BE USED AS: 1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Public Water Supply: well ID <input type="text"/> <input checked="" type="checkbox"/> Lawn & Garden <input type="checkbox"/> Dewatering: how many wells? <input type="text"/> <input type="checkbox"/> Livestock <input type="checkbox"/> Aquifer Recharge: well ID <input type="text"/> 2. Irrigation <input type="checkbox"/> Monitoring: well ID <input type="text"/> 3. Feedlot <input type="checkbox"/> Environmental Remediation: well ID <input type="text"/> 4. Industrial <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 10. <input type="checkbox"/> Oil Field Water Supply: lease <input type="text"/> 11. Test Hole: well ID <input type="text"/> <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? <input type="text"/> a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): <input type="text"/>					
Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: <input type="text"/> Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other <input type="text"/>		CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded			
Casing diameter 5 in. to 70 ft., Diameter <input type="text"/> in. to <input type="text"/> ft., Diameter <input type="text"/> in. to <input type="text"/> ft.					
Casing height above land surface 12 in. Weight 2.35 lbs./ft. Wall thickness or gauge No. SDR-26					
TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="text"/> <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) <input type="text"/> <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input checked="" type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole)					
SCREEN-PERFORATED INTERVALS: From 50 ft. to 70 ft., From <input type="text"/> ft. to <input type="text"/> ft., From <input type="text"/> ft. to <input type="text"/> ft. GRAVEL PACK INTERVALS: From 24 ft. to 70 ft., From <input type="text"/> ft. to <input type="text"/> ft., From <input type="text"/> ft. to <input type="text"/> ft.					
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other Bentonite hole plug					
Grout Intervals: From 4 ft. to 24 ft., From <input type="text"/> ft. to <input type="text"/> ft., From <input type="text"/> ft. to <input type="text"/> ft.					
Nearest source of possible contamination: <input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage <input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input type="checkbox"/> Sewage Lagoon <input type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well <input checked="" type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well <input type="checkbox"/> Other (Specify) <input type="text"/>					
Direction from well? <input type="text"/> Distance from well? <input type="text"/>					
10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	topsoil			
3	20	clay			
20	40	fine sand			
40	48	clay and fine sand			
48	70	medium sand			
					Notes: <input type="text"/>

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) **05/06/2021**.. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **236**.... This Water Well Record was completed on (mo-day-year) **5/10/2021**.... under the business name of **Harp Well and Pump Service**..... Signature **Todd S. Harp**.....

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.