| WATER WELL R  |   | Form WWC-5                            |                  | Divi           | sion of Water   |  |             |             |  |
|---|---|---------------------------------------|------------------|----------------|---|--|-------------|-------------|--|
| Original Record   |   | Change in Well                        | Use              |                | urces App. No.  |  | Well ID     |             |  |
| 1 LOCATION OF W.  | Section Number   Township Number   Range Number                               |                                       |                  |                |   |  |             |             |  |
| County: Sec   | VE1/4   |                                       |                  |                |   |  |             |             |  |
| 2 WELL OWNER: La  | ist Name:   | First:                                |                  |                |   | ere well is located                          |             |             |  |
| Business:  Address: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   |   |                                       |                  |                |   |  |             |             |  |
| Address: 10803 Bristleconest  |   |                                       |                  |                |   |  |             |             |  |
| City: WYChi   | ha s  | State: KS ZIP: U                      | กวศ              |                |   |  |             |             |  |
| 3 LOCATE WELL   |   |                                       |                  |                | 1   |  |             |             |  |
|   | WITH "X" IN 4 DEPTH OF COMPLETED WELL:  |                                       |                  |                |   | , ,  |             |             |  |
| SECTION BOX:  |   | undwater Encounter                    |                  |                |   | de:  |             |             |  |
| N   | 2)  |                                       |                  |                |   | Horizontal Datum: WGS 84 NAD 83 NAD 27       |             |             |  |
|   | WELL'S STATIC WATER LEVEL: ft.    below land surface, measured on (mo-day-yr) |                                       |                  |                | Source for Latitude/Longitude:                                    |  |             |             |  |
| NWNE  | above land surface, measured on (mo-day-yr)                                   |                                       |                  |                |   |  |             |             |  |
| NW  NE  | Pump test data: Well water was ft.  |                                       |                  |                | Land Survey Topographic Map                                       |  |             |             |  |
| w   |   | after hours pumping gpm               |                  |                |   | Online Mapper:                               |             |             |  |
| 1 1 1 1 1   |   | Well water was ft.                    |                  |                |   |  |             |             |  |
| SWSE  |   | hours pumping                         | pm               | <b>6</b> E1 43 |   |  | т П тос     |             |  |
|   |   | Estimated Yield:gpm                   |                  |                | 6 Elevation:  |  |             |             |  |
| S   | Bore Hole Diameter: in. to ft. and  |                                       |                  |                | Source:   |  |             |             |  |
| mile  | <u></u>   |                                       | ı. to            | ft.            |   |  |             |             |  |
| 7 WELL WATER TO BE USED AS:<br>  1. Domestic:   5.  |   |                                       |                  |                |   |  |             |             |  |
| 1. Domestic:  |   |                                       |                  |                |   |  |             |             |  |
|   | 6. Dewatering: how many wells?  |                                       |                  |                | 11. Test Hole: well ID  |  |             |             |  |
| Livestock   | 7. Aquifer Recharge: well ID  |                                       |                  |                | ☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores? |  |             |             |  |
| 2. Irrigation   |   | 9. Environmental Remediation: well ID |                  |                |   | a) Closed Loop  Horizontal  Vertical         |             |             |  |
| 3. ☐ Feedlot  | ☐ Air Sparge ☐ Soil Vapor Extraction  |                                       |                  |                |   | b) Open Loop Surface Discharge Inj. of Water |             |             |  |
| 4. Industrial   |   |                                       | Injection        |                |   | r (specify):                                 |             |             |  |
| Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:  |   |                                       |                  |                |   |  |             |             |  |
| Water well disinfected? So Yes No   |   |                                       |                  |                |   |  |             |             |  |
| 8 TYPE OF CASING USED: Steel PVC Other  |   |                                       |                  |                |   |  |             |             |  |
| Casing diameter   |   |                                       |                  |                |   |  |             |             |  |
| Casing height above land surface  |   |                                       |                  |                |   |  |             |             |  |
| TVDE OF SCREEN OR REDEORATION MATERIAL.   |   |                                       |                  |                |   |  |             |             |  |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)  |   |                                       |                  |                |   |  |             |             |  |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)  |   |                                       |                  |                |   |  |             |             |  |
| SCREEN OR PERFORATION OPENINGS ARE:   |   |                                       |                  |                |   |  |             |             |  |
| SCREEN OR PERFORATION OPENINGS ARE:   Continuous Slot   |   |                                       |                  |                |   |  |             |             |  |
| La Louvered Shutter La Key Punched La Wire Wrapped La Saw Cut La None (Open Hole)   |   |                                       |                  |                |   |  |             |             |  |
| SCREEN-PERFORATED INTERVALS: From   |   |                                       |                  |                |   |  |             |             |  |
| GRAVEL PACK INTERVALS: From   |   |                                       |                  |                |   |  |             |             |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.   |   |                                       |                  |                |   |  |             |             |  |
| Grout Intervals: From   |   |                                       |                  |                |   |  |             |             |  |
| Septic Tank   |   |                                       |                  |                |   |  |             |             |  |
| <b>1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -</b>  |   |                                       |                  |                |   |  |             |             |  |
| ☐ Sewer Lines       ☐ Cess Pool       ☐ Sewage Lagoon       ☐ Fuel Storage       ☐ Abandoned Water Well         ☐ Watertight Scwer Lines       ☐ Seepage Pit       ☐ Feedyard       ☐ Fertilizer Storage       ☐ Oil Well/Gas Well  |   |                                       |                  |                |   |  |             |             |  |
| Other (Specify)   |   |                                       |                  |                |   |  |             |             |  |
| Direction from well?  |   |                                       |                  | 1?             |   |  |             |             |  |
| 10 FROM TO  | L   | ITHOLOGIC LOG                         |                  | FROM           | TO L  | ITHO. LOG (cont.)                            | r PLUGGIN   | G INTERVALS |  |
|   |   |                                       |                  |                |   |  |             |             |  |
|   |   |                                       |                  |                |   |  | <u> </u>    |             |  |
|   |   |                                       |                  |                |   |  |             |             |  |
|   |   |                                       |                  |                |   |  |             |             |  |
|   |   |                                       |                  |                |   |  |             |             |  |
|   |   |                                       |                  |                |   |  |             |             |  |
|   |   |                                       |                  | 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) .00.22.18 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No   |   |                                       |                  |                |   |  |             |             |  |
| Kansas Water Well Col   | niractor's Lice   | nse NoIMR.                            | I nis wat        | er well Rec    | oru was comp  | neted on (nio-day-                           | y Cai jy.v. | 4-T-1 A. T. |  |
| Mail 1 white copy ale   | ong with a fee of   | 55.00 for each construc               | ted well to Kans | as Department  | of Health and Er  | vironment, Bureau of                         | Water, GWTS | Section,    |  |
| 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. |   |                                       |                  |                |   |  |             |             |  |
| Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015   |   |                                       |                  |                |   |  |             |             |  |