| | | | | | | | | | Stale | | |
|--|--|--------------------|---------------------------|---|-------------------|--|---|--------------|--------------------------|--|--|
| _ | | RECORD | Form V | WWC-5 | Di | vision of Wat | ег | 7 | | | |
| | | Correction | | e in Well Use | | ources App. | | ☐ Well ID | - | | |
| | | ATER WE | | Fraction NEW NEW NEW | 4SW4 Se | ction Numb | er Township Nun | | ange Number 2 □ E 🗷 W | | |
| 2 WELL | OWNER: | g wick st Name: | nete | First: Craiq | Street or Ru | | where well is locate | d (if unknov | vn, distance and | | |
| DUSINGSS. II A DATE OF THE PROPERTY OF THE PRO | | | | | | | | | | | |
| Address: 245 Fayenwood 5+ | | | | | | | | | | | |
| City: Wechta State: K ZIP: 67235 | | | | | | | | | | | |
| 3 LOCATI | | 4 DEPTI | I OF COM | IPLETED WELL: | 1.2.0f | t. 5 Latit | nude: 37. 685 pitude: 9.7.5// | 38737 | (decimal degrees) | | |
| | x" in N BOX: | Depth(s) G | roundwater 1 | Encountered: 1) 5 | . . ft. | Long | ritude: 9.7:51/5 | 287/6 | (decimal degrees) | | |
| 2) | | | | | | | | | | | |
| | below land surface, measured on (mo-day-yr | | | | | | | | | | |
| NW | above land surface, measured on (mo-day-yr | | | | | | | | | | |
| | Pump test data: Well water was ft. | | | | ft. | | and Survey Topo | | | | |
| W | Well water was ft. | | | | | | Online Mapper: | ••••• | | | |
| SW | SWSE after hours pumping gp | | | | | | | | | | |
| | Estimated Yield: 20 to gpm | | | | | 6 Elevation: | | | | | |
| | S | Bore Hole | | 1.2 in. to 120 | | Source | ze: Land Survey | | | | |
| 1 mile in. to ft. | | | | | | | | | | | |
| 1. Domestic: | | | | ter Supply: well ID | | 10 🗀 0 | il Field Water Supply: | leace | | | |
| | omestic: 5. Public Water Supply: well ID Household 6. Dewatering: how many wells? | | | | | | | | | | |
| | Lawn & Garden 7. Aquifer Recharge: well ID | | | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | | |
| Livesto | | | | g: well ID | | | thermal: how many bo | | | | |
| 2. ☐ Irrigati 3. ☐ Feedlo | | | invironment Air Sparge | al Remediation: well∃ e ☐ Soil Vapor | | | Closed Loop ☐ Horiza Open Loop ☐ Surface | | | | |
| 4. Industr | | | Recovery | | LAUGCUOII | | other (specify): | | | | |
| 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 diameter | | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) | | | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) | | | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | |
| ☐ Continuous Slot | | | | | | | | | | | |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | |
| | | | | ft., From | ft. to | ft., Fron | 1 ft. to | ft. | | | |
| | | ole contaminat | | n Die Deire | _ | l I ivoqetoole D | | ــــه داندند | | | |
| □ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage □ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well | | | | | | | | | | | |
| Francisco de Francisco Fra | | | | | | | | | | | |
| Other (Specify) | | | | | | | | | | | |
| 10 FROM | om well? | | LITHOLO | Distance from | FROM | TO | LITHO. LOG (cont.) | | NG INTERVALS | | |
| 0 | 2 | Tors | 540 | | 1 KOM | | ZITIO. LOG (WIII.) | or r DOUGI | TO HITEKANTO | | |
| 2 | 37. | cou | | | | | | | | | |
| 3,7. | 44 | Med | <u>, So</u> | md | | | | | | | |
| 44 | 120 | 5 14 | le | | | | | | | | |
| | | | | | | | | | | | |
| | | | | 1. 1 | Notes: | 1 | L | | | | |
| | | | ivotes: | | | | | | | | |
| | | | | | | | | | | | |
| 11 CONT | RACTOR' | S OR LAND | OWNER'S | S CERTIFICATIO | N: This water | er well was | constructed, re is true to the best of | constructe | d, or plugged | | |
| under my j | urisdiction a | and was comp | oleted on (n | no-day-year) 8 | Joseph Well De | this record | is true to the best of impleted on (mo-day- | my knowle | dge and belief. | | |
| under the b | usiness nan | ne of | hase | - Kesil | der Well Ke | | mpieted on (mo-day | • , | 1 | | |
| | | | | ······································ | our records. Subm | | | | | | |
| 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 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