		RECORD		WWC-5		vision of Water			
				ge in Well Use		ources App. No.		Well ID	
1 LOCATION OF WATER WEI			LL:	Fraction		ction Number	Township Numb		
County: Kiowa ¼ NW ¼ NE					NE ¼ 22 T 27 S R 20 ☐ E ■ W Street or Rural Address where well is located (if unknown, distance and				
2 WELL				First:				· · · · · · · · · · · · · · · · · · ·	
Business: Ebert Farms Address: PO Box 242 direction from nearest town or intersection): If at owner's address,								r's address, check here:	
Address: Address:	PO Box	242			6 1/2 North	6 1/2 North, 1/4 West of Mullinville			
City:	Kinslev		State: KS	ZIP: 67547		•			
2 LOCATE WELL								76	
WITH "						t. 5 Latitud	e: 37.0090	76(decimal degrees)	
	SECTION BOX: Depth(s) Groundwater Encountered: 2)							457 (decimal degrees)	
1	1	2)	IL. DATIC WA	3)π., or 4) ATER LEVEL:	Dry Well			4 ■ NAD 83 □ NAD 27	
	X	WELL S S	and surface	e, measured on (mo-day	.vr\ 8-5-16		Source for Latitude/Longitude: GPS (unit make/model:)		
	·			e, measured on (mo-day					
NW	NE			water was		1	(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper:		
w	E			s pumping					
	1 1		Well water was ft.						
SW	SE	after	after hours pumping gpm						
		Estimated Y	Estimated Yield:gpm			6 Elevation:			
1	S	Bore Hole I	Bore Hole Diameter:10 in. to120 ft. an				Source: ☐ Land Survey ■ GPS ☐ Topographic Map		
mile in. to ft. Uther									
7 WELL WATER TO BE USED AS:									
1. Domestic			5. Public Water Supply: well ID						
House			6. ☐ Dewatering: how many wells?7. ☐ Aquifer Recharge: well ID						
☐ Lawn a			8. Monitoring: well ID			12. Geothermal: how many bores?			
2. Irrigati			9. Environmental Remediation: well ID				a) Closed Loop Horizontal Vertical		
_ = 0				Air Sparge Soil Vapor Extraction			b) Open Loop Surface Discharge Inj. of Water		
4. Industr			Recovery Injection			13. Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:									
Was a chemical bacteriological sample submitted to KDHE? Yes No 11 yes, date sample was submitted: Water well disinfected? Yes No									
8 TYPE OF CASING USED: Steel PVC Other									
Cosing diameter 5 in to 120 th Diameter in to the Diameter in to the Diameter in to the Diameter in to the Diameter in the Dia									
Casing diameter									
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 Wrapped ☐ Saw Cut ☐ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage									
Sewer Lines									
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well ■ Other (Specify) .None									
Direction from well?									
10 FROM	ТО		ITHOLO		FROM			PLUGGING INTERVALS	
0	3	Top sandy s		010 000	1	1 1	THO. EOG (COME) OF	TEGGING INTERVILES	
3	16	Soft sandy of		· · · · · · · · · · · · · · · · · ·					
16	94		and & gravel- med, coarse, clean, loose						
94	105		an & white clay						
105	120		and & gravel- small, med, tight, coarse						
100	140	& clean	or siriall,	mod, agrit, coaise	1	 			
		a dican			Notes:	<u> </u>			
Trous.									
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) .8-5-16									
Kansas Wa	ter Well Co	ontractor's Lic	ense No'	134 This W	ater Well Re	cord was comp	leted on (mo-day-ye	ear) 8-10-16	
under the b	usiness nan	ne of Rosena	rantz Be	emis Ent.Inc	S	ignature 🗀 1	man alek	4	
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.									
				66612-1367. Mail one to			for your records. Teleph		
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									