

WATER WELL			WWC-5		9213		sion of Wate					
			e in Well Use			Resources App. No.			Well ID Township Number			
			Fraction	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			-					
County:				1/4 1/		D	1 4 1 1	1	T S	R		
						treet or Rural Address where well is located (if unknown, distance and						
Business: Address:												
Address:												
City:		State:	ZIP:									
3 LOCATE WELL	4 DEDTH	OF COM	IDI ETED I	WEIT.		ft	5 T a 444				(1 · 1 1)	
WITH "X" IN		4 DEPTH OF COMPLETED WELL:										
SECTION BOX:	1 /	Depth(s) Groundwater Encountered: 1)					Longitude:					
N		2) ft. 3) ft., or 4) □ D WELL'S STATIC WATER LEVEL: □ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr)					Datum: WGS 84 NAD 83 NAD 27 <u>Source for Latitude/Longitude</u> : GPS (unit make/model:)					
NW NE							(WAAS enabled? \Box Yes \Box No)					
	Pump test da	Pump test data: Well water was ft. after hours pumping					□ Land Survey □ Topographic Map □ Online Mapper:					
w	after											
SW SE			vater was									
			s pumping		. gpm		6 Flovo	tion	ft 🗖 Ground Level 🗖 TOC			
	Estimated Y				C 1		6 Elevation:ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map					
S	Bore Hole D		in. to						\square Other			
	O DE LISED A		in. to		It.							
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 												
□ Household			g: how many									
Lawn & Garden			echarge: well							□ Uncased □ Geotechnical		
			g: well ID						al: how many bores			
2. Irrigation			al Remediatio						Loop 🗌 Horizonta			
3. 🗌 Feedlot		Air Sparge			Extraction		b) Or	pen I	Loop 🔲 Surface Dis	charge [Inj. of Water	
4. 🗌 Industrial		Recovery		jection		13. Other (specify):						
Was a chemical/bac	eriological sam	nple subm	nitted to KD	HE?	Yes 🗆	No	If ves. date	e sar	nple was submitted	1.		
Water well disinfecte						110	11 J <i>00</i> , auto					
8 TYPE OF CASIN			C 🗆 Other		С	ASIN	G IOINTS	· □	Glued Clamped	□ Weld	ed 🗖 Threaded	
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
TYPE OF SCREEN									0 0			
Steel Steel	ainless Steel	Fiber	glass	DVC			🗌 Oth	ner (S	Specify)			
	alvanized Steel	Conc		□ None	used (oper	n hole)						
SCREEN OR PERFO	RATION OPE	NINGS A	RE:									
Continuous Slot	☐ Mill Slot		auze Wrapped						Other (Specify)			
Louvered Shutter							one (Open H					
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. o ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft.												
				t Dairar			ivesto als Da			da Stanaa		
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage Septic Tank Core Back Septic Tank Description 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												
			ı ت				eranzei 510	inge		. Sub 1101	-	
☐ Other (Specify) Direction from well? ft.												
10 FROM TO		ITHOLO			FRO				HO. LOG (cont.) or	PLUGGIN	NG INTERVALS	
								-				
					Notes	5:						
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) and this record is true to the best of my knowledge and belief.												
under my jurisdiction	and was comple	eted on (n	no-day-year)		· · · · · · · · · · · · · · · · · · ·	and th	nis record i	is tru	e to the best of my	/ knowled	lge and belief.	
Kansas Water Well C	ontractor's Lice	nse No		This W	ater Well	Reco	ord was con	nple	ted on (mo-day-ye	ar)	, 	
under the business na	Sand one convit-	WATED		and ratain	one for ver		de Esser [¢]	5 00 f	or each constructed1	1		
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.												
Visit us at http://www.ko			,BJ				,	- PC	,		SA 82a-1212	

Form	WWC5			
Contractor	Martin's Well Service			
Well Owner	cherl Hale			
Doc ID	1229213			

Litholgy

From	То	LithologicLog
0	20	Top soil/clay/finesand
20	40	clay
40	60	streaks clay+fine-med. sand
60	80	sand/gravel/sandy clay/coarse-med. sand
80	120	sandy clay/streaks fine-med. sand
120	140	clay/streak fine sand
140	160	streaks fine-med. sand + clay
160	180	fine sand/clayf
180	220	clay/streaks fine-med. sand
220	240	sand/gravel/rock/little clay
240	300	sand/gravel/clay/
300	320	sandy clay/sand/gravel
320	380	sandy clay/sand
380	400	sand/dark rock/little clay
400	420	sand/clay/shale
420	440	shale/streak brown rock
440	460	med.sand/streaks shale
460	480	med. sand/ brown rock/little clay