WATER WELL RECORD Form WWC-5 Division of Water												
Original Record Correction Change in Well Use						Resources App. No.			· · · · · · · · · · · · · · · · · · ·	Well ID	<u> </u>	
I LOCATION OF WATER WELL: Fraction						Section Number Township Number Range Number Range Number Township Number Range Number						
County: PRAIT A 14 NE 14 NW 14 Section reduced Township Points Range N R												
2 WELL OWNER: Last Name: BLACKWELLDERIST. KENNY Business: 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:												
Address: FROM THE INTERSECTION OF SE 130TH AVE AND SE 90TH												
Address: City: HUTCHINSON State: KS ZIP: ST 3/4 MILE WEST SOUTH INTO 250 FT												
3 LUCAT		4 DEPTH	I OF COM	(PLETE	D WELL:	120fi	ft. 5 Latitude:					
	Depth(s) Groundwater Encountered: 1)							Longitude:(decimal degrees)				
SECTION BUX: 2)							Honzoniai Datum: LI WGS 84 LI NAD 83 LI NAD 27					
below land surface, measured on (mo-day						······ As Source for Landidea Angunde:				`		
1 1 "	above land surface, measured on (mo-							irs (i N	WAAS enabled? 🗖	Yes D		
Pump test data: Well water was						L.		☐ Land Survey ☐ Topographic Map				
w after hours pumping							Online Mapper:					
sw	Well water was									· · · · · ·		
1 1 1	after hours pumping gpm Estimated Yield: 65 S Bore Hole Diameter: 9.75 in. to ft.						6 Elevation:					
	S Bore Hole Diameter. 9.73 in. to						Source: Land Survey GPS Topographic Map					
1 mile in. to												
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. D Public Water Supply: well ID 6. D Dewatering: how many wells?												
☐ Household 6. ☐ Dewatering: how many wells? ☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID												
	Livestock 8. Monitoring: well ID								al: how many bores			
	2. Irrigation 9. Environmental Remediation: well ID								Loop Horizont			
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E						extraction	b) Open Loop Surface Discharge Inj. of Water					
4. Industrial Recovery Injection 13. Other (specify):												
Was a chemical/bacteriological sample submitted to KDHE? Q Yes No If yes, date sample was submitted:												
Water well disinfected? Yes No												
Water well disinfected? Yes Q No 8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter 5 in to 100 ft, Diameter ft. Diameter ft. Diameter in to ft. Diameter in to ft. Casing height above land surface in Weight SCH 160 lbs/ft. Wall thickness or gauge No.												
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)												
	DEDEAD A'	LED WESTURE	ned ∐ W: AlS: Emm	100 me wrapp	^{ea} 120°°	W CUL ∐II G From	1 nsqu) snov 1 8	101e)	9 From	ft to	. e	
Louvered Shutter												
9 GROUT MATERIAL 30 Neat cement Coment grout Bentonite Other												
Grout Intervals: From												
Nearest son	irce of possi	de contaminat	ion:									
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage												
Sewer		_	Cess Pool Seepage Pit] Sewage La] Feedyard		Fuel Storage Fertilizer Sto			oned Water :II/Gas Well		
DON(0												
Direction from well? WEST Distance from well? 250												
10 FROM	TO		LITHOLOG			FROM	TO		HO, LOG (cont.) or		G INTERVALS	
0	5	TOPSOILS				ļ			<u> </u>			
5	25 65	DARK IAN		DIDO:		 						
25 65	65 120	SAND WITH				ļ	<u> </u>					
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11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, I 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. Kansas Water Well Contractor's License No. 845 This Water Well Record was completed on (pao-day-year) 5/11/1/1 under the business name of 4 BHOTHERS LLC Signature												
Kansas Water Well Contractor's License No. This Water Well Record was completed on frao-day year)												
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Edvironment, Bureau of Water, GWTS Section,												
Mail 1 white copy along with a fee of \$5.00 for each constructed well of Ransas Department of Health and Edvironment, Buteau of Water, G w 15 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												