WATER WELL R	ECORD	Form W	WC-5	Di	vision of Wate	1 20/707/2			
Original Record	Correction [Change	in Well Use		ources App. N	-	Well ID		
1' LOCATION OF WATER WELL:		: 1	Fraction	Se	ction Numbe		Range Number		
			45W45W4		//	T 29 S	R 19 DE ETW		
2 WELL OWNER: La			First:	Street or R	ıral Address	where well is located (i	f unknown, distance and		
Business: Woolsey Operating Co. direction from nearest town or intersection): If at owner's address, check here Address: Woolsey Operating Co.									
Addition 175 N. MANKE!									
City: Wichita State: KS ZIP: 67202					South 7	0 031. 24 W	est North to wel		
3 LOCATE WELL									
WITH "X" IN	4 DEPTH OF COMPLETED WELL:					5 Latitude:(decimal degrees)			
SECTION BOX:	Depth(s) Groundwater Encountered: 1)					Longitude:			
N	WELL'S STATIC WATER LEVEL: /Z7 ft.						□ NAD 83 □ NAD 27		
	below land surface, measured on (mo-day-yr)					e for Latitude/Longitude:			
NWNE	above land surface, measured on (mo-day-yr). //-//7				7	☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft.					, Land Survey Topographic Map			
W	after hours pumping gpm					Online Mapper:			
SW SE	Well water was ft.								
×	after hours pumping								
S	Estimated Yield:gpm Bore Hole Diameter: 19.72 in. to				Source	Source: Land Survey GPS Topographic Map			
mile	in, to						Topograpme wap		
7 WELL WATER TO BE HEER AC.									
1. Downsted 5. Public Water Supply: well ID									
☐ Household	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID		
☐ Lawn & Garden	7. Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical			
☐ Livestock						2. Geothermal: how many bores?			
2. 🔲 Irrigation		9. Environmental Remediation: well ID				a) Closed Loop Horizontal Vertical			
3. Teedlot									
4. Industrial Recovery Injection 13. Other (specify):									
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:									
Water well disinfected? X Yes No									
8 TYPE OF CASING USED: Steel N PVC Other CASING JOINTS: M Glued Clamped Welded Threaded									
Casing diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☑ PVC ☐ Other (Specify)									
SCREEN OR PERFORATION OPENINGS ARE:									
☐ Continuous Slot									
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)									
Louvered Shutter									
GRAVEL PACK INTERVALS: From 175 ft. to 121 ft., From ft. to 1. ft., From ft. to 1. ft.									
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 ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
Direction from well? Distance from well?									
10 FROM TO		THOLOG		FROM	TO		LUGGING INTERVALS		
0 14	TAN T								
14 92	TAN CI								
92 144	Fine 7	ion Sa							
144 175	Controc	gras	e/						
		/							
•									
				Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a 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									
under the business name of									
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and invironment, 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.									
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