| WATER WELL R | | | WWC-5 | Di | vision of Water | | | | |
|--|--|------------|-----------------|-------------|---|--------------------------------|--------------------------|--|--|
| Original Record | Original Record | | | | ources App. No | | Well ID | | |
| | LOCATION OF WATER WELL: | | | | ction Number | Township Numb | | | |
| County: Kingman | | | "HE SE | | | | | | |
| 2 WELL OWNER: Last Name: Dixion First: Red Street or Rural Address where well is located (if unknown, distance a | | | | | | | | | |
| Business: Address: 14994 5E 100 57. Address: 14994 5E 100 57. Morwick North on 58 | | | | | | | r's address, check here: | | |
| Address: | | | | | | _ | | | |
| City: Norwid | <u> </u> | State: KS | ZIP: 67/18 | SE 100. | 57 North | - 14 TO WE | ill west of SE IS | | |
| 3 LOCATE WELL WITH "Y" IN 4 DEPTH OF COMPLETED WELL: 65 Latitude: | | | | | | | | | |
| WITH "X" IN | Depth(s) Groundwater Encountered: 1) | | | | | | | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) Dry W | | | | Horizontal Datum: WGS 84 NAD 83 NAD 27 | | | | |
| | WELL'S STATIC WATER LEVEL: | | | | | Source for Latitude/Longitude: | | | |
| | below land surface, measured on (mo-day-y | | | | GPS (unit make/model:) | | | | |
| NW NE | above land surface, measured on (mo-day- Pump test data: Well water was | | | | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| W + + + + E | | | | | ☐ Land Survey ☐ Topographic Map | | | | |
| | after hours pumping gpm Well water was ft. | | | | Online Mapper: | | | | |
| SW SE - | after hours pumping gpm | | | | | | | | |
| | Estimated Y | ield: | gpm | 6 Elevation | | n:ft. Ground Level TOC | | | |
| S | Dolo Ilolo Diamotoli Illi to Illi to Illi | | | | Source: | | | | |
| mile | | | in. to | ft. | | Other | | | |
| 7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID | | | | | | | | | |
| 1. Domestic: | | | | | | | ease | | |
| Lawn & Garden | 6. Dewatering: how many wells? | | | | 11. Test Hole: well ID | | | | |
| Livestock | 7. Aquifer Recharge: well ID | | | | 12. Geothermal: how many bores? | | | | |
| 2. Irrigation | 9. Environmental Remediation: well ID | | | | | | | | |
| 3. Feedlot | | Air Sparge | | | | | scharge Inj. of Water | | |
| 4. Industrial | | Recovery | ☐ Injection | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: | | | | | | | | | |
| Water well disinfected? Wyor D No. | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel XPVC Steel XPVC Other CASING IOINTS: XCOunt Clamped Welded Strength | | | | | | | | | |
| Casing diameter | | | | | | | | | |
| Casing height above land surface | | | | | | | | | |
| 1 YPE 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 ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | | | | |
| Louvered Shutter Key Punched Wire Wranned Saw Cut None (Open Hole) | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Rependent Other | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| Nearest source of possible | | | | | | | | | |
| ☐ 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 ☐ Feedward ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) | | | | | | | | | |
| Direction from well? | 999 | , | Distance from w | 5 | 99 | ft. | | | |
| 10 FROM TO | Ĺ | ITHOLOG | GIC LOG | FROM | TO LI | | PLUGGING INTERVALS | | |
| 0 5 | | | TOP Soil | | | = = (//01 | | | |
| 5 20 | | Sandy | | | | | | | |
| 20 65 65 67 | | TAN 3 | | | | | | | |
| 65 67 | Red S | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | Notes: | | | | | |
| | | | | | | | | | |
| 11 CONTRACTOR OF A VIDOUS PROPERTY OF THE PROP | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed or (modern and plugged) | | | | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) . 2.25.20 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No | | | | | | | | | |
| under the husiness name | of Color | 1186 140 | Here Well -S | VR. Ci | ord was comp | eted on mo-day ye | (a1) . (| | |
| under the business name of Crawdis WAFOR Well Sule. Signature Signature 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. | | | | | | | | | |
| Visit us at http://www.kdhcks. | | KSA 82a-12 | | • | Revised 7/10/2015 | | | | |