WAIL	K WEL	L RECORD	rorm w	WC-5	Division of V	Vater Resources App. N	No	
1 LOCATION OF WATER WELL:			Fraction		Section Number	er Township No.	Range Number	
County: Sumner			1/4 SW 1/4 SW	/ 1/ SF 1/	3	T 30 S	R 1 □E ☑W	
		ddress of Well Location; i		Global Positioning System (GPS) information:				
from nearest town or intersection: If at owner's address, check here . L						Latitude: (in decimal degrees)		
				Longitude: (in decimal degrees)				
· · · · · · · · · · · · · · · · · · ·								
					Elevation:			
A WATER WELL OWNER					<u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
2 WATER WELL OWNER: Jan Hopson					Collection Method:			
RR#, Street Address, Box #: 438 E. 140th Ave. N.					GPS unit (Make/Model:)			
C': C: ZID C 1					☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
City, State, ZIP Code : Peck, KS 67120					Est. Accuracy: \square <3 m, \square 3-5 m, \square 5-15 m, \square >15 m			
					Est. Accuracy:] <3 m, 3-5 m,		
3 LOCATE WELL								
WIT	H AN "X'	'IN 4 DEPTH OF C	COMPLETED WEL	į, 56		. ft.		
SEC	SECTION BOX: N Depth(s) Groundwater Encountered (1).29 ft. (2).56 ft. (3) ft. WELL'S STATIC WATER LEVEL29 ft. below land surface measured on mo/day/yr							
	N WELL'S STATIC WATER LEVEL29ft. below land surface measured on mo/day/yr							
Pump test data: Well water wasft. after hours pumping								
DOM MICE D								
EST. YIELDgpm. Well water wasft. after hours pumpingg							nping gpm	
W							.ft.	
WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well							Injection well	
SW SE Domestic Feedlot Oil field water supply Dewatering Other (Specify below)								
1 1								
Was a chemical/bacteriological sample submitted to Department? Yes No								
in jes, incode july is sample was submitted								
	1 111116	Water well disin	fected? Yes	No				
5 TYPE OF CASING USED: Steel PVC Other								
CASING JOINTS: ☑ Glued ☐ Clamped ☐ Welded ☐ Threaded								
Casing diameter .5 in. to .23 ft., Diameter ft., Diameter ft.								
Cooling beliefs above lend our fees 12 12 12 12 12 12 12 12 12 12 12 12 12								
Casing height above land surface12								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)								
Brass Galvanized Steel None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
☐ Continuous slot ☑ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)								
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)								
SCREEN-PERFORATED INTERVALS: From. 23								
From A 4								
From ft., ft., From ft., to ft.								
GRAVEL PACK INTERVALS: From								
From								
CODULT MATERIAL TO NOT TO THE TOTAL TO THE T								
6 GROUT MATERIAL: Neat cement Cement grout Dentonite Other								
Grout Intervals: From .23 ft. to .3 ft., From ft. to ft., From ft. to ft.								
What is the nearest source of possible contamination:								
Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)								
☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well								
		nt sewer lines 🔲 Seepage p		Fertilizer st	orage 🔲 Oil we	II/gas well Unk	nown	
Direc	ction from	n well		. Distance	from well			
FROM	ТО	LITHOLOG		FROM			JGGING INTERVALS	
			IC EOO	INOM	TO LITTO	. LOG (cont.) or PL	DOUBLE INTERVALS	
0	20	Clay Sand Mix						
20	55	Sand						
55	1	Shale		 				
JJ	00	Silaie		 				
				<u> </u>	. [
	+			 				
				1 1				
	+			 				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This was all the Fig. 1.								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☑ constructed, ☐ reconstructed, or ☐ plugged								
under my jurisdiction and was completed on (mo/day/year) .3/6/13								
Kansas Water Well Contractor's License No. 818 This Water Well Record was completed on (mo/day/year) 3/147/3								
under the business name of Hobbs Mechanical Inc								
under the business name of Hobbs Mechanical, Inc. by (signature) ! I day y helly								
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.								
(white, bl	ue, pink) to	Kansas Department of Health	and Environment, Bureau	of Water, Geolo	gy Section, 1000 SV	Jackson St., Suite 420,	Topeka, Kansas 66612-1367.	
Telephone	785-296-5	522. Send one copy to WAT	ER WELL OWNER and	retain one for v	our records. Include	e fee of \$5.00 for each	constructed well. Visit us at	
http://www	w.kdheks.gc	ov/waterwell/index.html.		,				
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy								
024					CHOCK.	ше сору, ∟ В	ще сору, 📖 т нік сору	