	FER WELL RECORD Form WWC-5 Division of Water										
	Correction				ources App.			Well ID			
1 LOCATION OF WATER WELL: Fraction					Section Number Township Number Range Number						
								E E W			
2 WELL OWNER:	ast Name: Sul	lium i	First: Jim	Street or Ru	ral Address	when	re well is located	(if unknown	, distance and		
business:				direction from	nearest town o	or inter	section): If at owner	s address,	check here:		
Address: 1911 E minneapolis CR. I mipe South of Norwich on SE145 A											
City: VAlley	Center St	tate: KS	ZIP: 67147	35	140 5	57.	North ?	314			
3 LOCATE WELL	4 DEPTH	OF COMP	LETED WELL:	5 0 ₽	5 Totit	hido.			(decimal degrees)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)					5 Latitude:					
SECTION BOX:	2) ft. 3) ft., or 4) Dry Well					Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27					
	WELL'S STATIC WATER LEVEL: Source for Latitude/Longitude: GPS (unit make/model:										
NWNE	above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No)					
		Pump test data: Well water was					☐ Land Survey ☐ Topographic Map				
W	after hours pumping gpm Well water was ft.					Online Mapper:					
SW SE	after hours pumping gpm										
	Estimated Yie		6 Elevation:ft. Ground Level TOC								
S	Bore Hole Dia	Source		Land Survey							
1 mile in. to											
7 WELL WATER TO BE USED AS: 1 Domestic: 1 Domestic: 1 Domestic: 1 Domestic: 1 Domestic: 1 Domestic: 10 Doi! Field Water Supply: lease											
1. Domestic: Household	5. Public Water Supply: well ID					10. ☐ Oil Field Water Supply: lease					
Lawn & Garden	7. Aquifer Recharge: well ID					Cased Uncased Geotechnical					
Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?					
2. Irrigation	9. Environmental Remediation: well ID					losed	Loop Horizont	al 🗌 Vert	ical		
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction						oop Surface Dis				
4. Industrial	□ F	Recovery	☐ Injection		13. 🗖 O	ther (specify):				
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:											
Water well disinfected? Was No											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter											
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)											
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possibl			☐ Dit Deisa		Livestock D	enc	□ Insectio	ide Storage			
☐ 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											
☐ Other (Specify)						-					
Direction from well?	7Z7		. Distance from w				ft.				
10 FROM TO		THOLOGIC		FROM	TO	LITI	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
0 5			and TOP Soil	/		-					
5 35 35 50		m 5Am		-							
35 50	Red &	Blue S	AAR								
	-					<u> </u>					
				NIA		<u> </u>	1::				
				Notes:				£ . }			
11 CONTRACTOR'S OR LANDOWNED'S CERTIFICATION. This water well was Vocantructed or an Induced											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Cor	itractor's Licen	se No 6	72 This W	ater Well Re	cord was co	mple	ted on (mo-day-ye	ar) . 9	22-2020		
Kansas Water Well Cor under the business name	of Marke	5115 6	Le Land Line II	TUA C	anature	1	1 /me	.41			
Mail 1 white conv alc	001	· · · · · · · · · · · · · · · · · · ·	4761-10-41	Z.Y	guature	7.7		·//\\			
winte copy are	ong with a fee of \$5	5.00 for each c	onstructed well to: Ka	insas Departmen	t of Health and	d Envir	ohment, Kureau or	mor, GW15	section,		
1000 SW Jackson St Visit us at http://www.kdheks	ong with a fee of \$5 t., Suite 420, Topel	5.00 for <u>each</u> c ka, Kansas 666	onstructed well to: Ka 512-1367. Mail one to	insas Departmen	t of Health and ner and retain	d Envir	ohment, Kureau or	one 785-296	section,		