WATER WELL RECORD		Form WWC-5		Division of W	ater Resources App. N	o.	
1 LOCATION OF WA	TER WELL:	Fraction	A / 2. 1	1/11	Section Numbe		Range Number
	ber	/VW	/V4CV	1/4/V W	14	T S S	RI4 DE WW
Street/Rural Address of					Latitude	ing System (GPS) ir	in decimal degrees)
from nearest town or intersection: If at owner's address, check here \mathbf{X} . In Lake City, KS					Latitude: (in decimal degrees) Longitude: (in decimal degrees)		
In La	Kecity	123	^		Elevation:		••••
2 WATER WELL OWNER: Denn'S Prelling					Datum: WG Collection Metho	S 84, □ NAD 83, □	NAD 27
RR#, Street Address, Box #:							
City, State, ZIP Code : Lake City, KS 6 70 7 Est. Accuracy: S m, 3-5 m, 5-15 m, >15							
3 LOCATE WELL			, ,	*			5-15 m, <u> </u>
WITH AN "X" IN	4 DEPTH OF	COMPLE	TED WELL	<i>55</i>	 	ft.	
SECTION BOX: Depth(s) Groundwater Encountered (1)							
WELL'S STATIC WATER LEVEL. 10.5. ft. below land surface measured on mo/day/yr. 3.7.1.2 Pump test data: Well water was							
NW NE	Well water was						
W E							
		TO BE USED AS: Public water supply Geothermal Injection well					
SWSE							Other (Specify below)
Was a chemical/bacteriological sample submitted to Department? Yes No							
S If yes, mo/day/yr sample was submitted							
mile	Water well disin						
5 TYPE OF CASING USED: Steel PVC Other							
CASING JOINTS: Solution Clamped Welded Threaded Casing diameter							
Casing height above land surface							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
☐ Steel ☐ Stainless Steel ☐ 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 ft. to ft., From ft. to ft.							
From							
From							
From ft. to ft., From ft. to ft.							
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
What is the nearest source of possible contamination:							
Septic tank	Lateral lin			Livestock p			er (specify below)
Sewer lines Watertight sewer li	Cesspool		ige lagoon	Fuel storage Fertilizer ste		ned water well	
Direction from well							
FROM TO	LITHOLOG	IC LOG		FROM	TO LITHO.	LOG (cont.) or PLU	GGING INTERVALS
0 3 50 35 Fin							
5 25 000	FI SA						
Marie Au	k Sand						
28 34 San	nd Some	Mea	,				
34 35 Ku	d Sheli						
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)							
under the business name of							
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 inswers. 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.							
Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at							
http://www.kdheks.gov/waterwell/index.html.							
KSA 82a-1212							