| | | RECORD Correction | | WWC-5 e in Well Use | | Division of tesources A | | | \square w | ell ID | | |
|---|---|-------------------|------------------------|-------------------------------|--|--------------------------------|--|-----------------------------|-------------|--|---|--|
| | LOCATION OF WATER WELL: Fraction | | | Fraction | Section Number | | | Township Number Range Numb | | | e Number | |
| County: HARPER 1/4 AB1/4 | | | | | 1/4 NW4 | W 5 T 31 S R 6 □ E | | | | | 60 | |
| 2 WELL O | WNER | : Last Name: 5 | handy | First: JACK | | Rural Add | ress who | ere well is loo | | | | |
| Business: | Business: direction from nearest town or intersection): If at owner's address, check here | | | | | | | | | | neck here: | |
| Address: | Address: | | | | | | | | | | | |
| | vicu | | State: RS | ZIP: 67235 | emin in | | | | · | | | |
| 3 LOCATE | | 4 DEPTI | H OF COM | IPLETED WELL: | 50 | . ft. 5 L | atitude | : | | (c | decimal degrees) | |
| WITH "X" SECTION | | | | Encountered: 1) | | 1 | | | | | decimal degrees) | |
| SECTION N | DOA. | | | 3) ft., or 4) | | | | | | | | |
| | | | | TER LEVEL:🞾 | | Source for Latitude/Longitude: | | | | | | |
| X | 1 | below | land surface | , measured on (mo-da | y-yr) | ····· | | | | | | |
| NW | - NE | Bump test | land surface, | measured on (mo-da | | | | | | | | |
| w H | Pump test data: Well water was | | | | | | | | | | | |
| | Well water was | | | | | | | | | | | |
| SW - | - SE | after. | hours | s pumping | npinggpm | | | | | | | |
| | Estimated Yield:gpm Bore Hole Diameter: 4.38. in. to | | | | 6 Elevation | | | n: | | | | |
| S | la I | Bore Hole | ft. and | 3 | Source: Land Survey GPS Topographic Map Other | | | | | | | |
| 1 mile in. to ft. | | | | | | | | | | | | |
| 1. Domestic: | AIEK | | | toe Cumply: yeal! ID | | 10. [| | ald Water Sun | nlu lagga | | | |
| ☐ Househo | ıld. | | | ter Supply: well ID . | | | | eld Water Sup e: well ID | | | | |
| ☐ Lawn & | _ 0 , | | | | | | | Uncased | | | ••• | |
| Livestoc | | | | g: well ID | | | | nal: how many | | | •••• | |
| 2. Trrigation | | | | al Remediation: well | ID | | | d Loop 🔲 Ho | | | | |
| 3. Feedlot | | | | | | | b) Open Loop Surface Discharge Inj. of Water | | | | | |
| 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? Yes No | | | | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other | | | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | | | |
| 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: | | | | | | | | | | | | |
| Continu | | | | | | | | Other (Specif | fy) | | ••••• | |
| Louvere | ea Snutte | r 「□ Key Pund | cnea ∟ w /AIS: Eron | ire wrapped \square : | Saw Cut [| ☐ None (Op | en Hole |) A Em | 0.00 | ft to | fr | |
| GR GR | AVEL E | ALED INTERV | ALS. FIUII | n 50 ft. to | 7.167 II., FIO (200) ft Fro | III m | ft to | f Fr | 0111 0m | II. 10 . | II. | |
| | | | | Cement grout | | | | | | | | |
| Grout Interval | s: From | 20 ft. t | to | . ft., From | ft. to | Omer ft F | rom | ft. to | | ft. | • | |
| | | sible contamina | | , | | , - | | | | | | |
| ☐ Septic Ta | | _ | Lateral Line | | | ☐ Livesto | | | nsecticide | | | |
| ☐ Sewer Li | | | Cess Pool | ☐ Sewage I | | ☐ Fuel Sto | | | Abandoned | | /ell | |
| ☐ Watertig | | | Seepage Pit | ☐ Feedyard | Į. | ☐ Fertilize | er Storag | е 🔲 (| Dil Well/G | as Well | | |
| ☐ Other (S: Direction from | | | | Distance from | well? | 999 | | | ft | | | |
| 10 FROM | TO | | LITHOLO | | FROM | | | | | UGGING | INTERVALS | |
| 0 | 5 | TOP S | | SMALL Some | | | | | | | | |
| 5 | 20 | Sura | 11 Som | | 1,00 | | | | | | | |
| 20 | 30 | CATSE | TOM | ned. Smid | | | | | | | | |
| 30 | 50 | Rell | Shale | · | | | | | | | | |
| | | | | | | | | | | TARABLE TO THE STATE OF THE STA | | |
| | | | | | 3.7 | | | | | | | |
| | Notes: | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 11 CONTR | ACTO | R'S OR LAND | OWNED | S CERTIFICATION | N. Thie w | ater well v | vas Ma | onstructed F | reconst | ructed c | r I plugged | |
| under my iur | risdiction | n and was com | pleted on (n | no-day-year) | | and this rec | cord is to | rue to the bes | i reconst | nowledg | е and belief. | |
| Kansas Wate | er Well (| Contractor's Li | cense No | This V | Vater Well | Record wa | s compl | eted on (mo- | day year) | /. | 15-12 | |
| under the business name of . CROW. dis. WATER Well SRV | | | | | | | | | | | | |
| INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topcka, Kansas 66612-1367. Telephone (785) 296-3565. | | | | | | | | | | | | |

KSA 82a-1212

Revised 9/10/2012

Visit us at http://www.kdheks.gov/waterwell/index.html