WATER WELL RECORD Form WWC-5			Division of Water				
Original Record		ge in Well Usc		irces App. No.		Well ID	
	OCATION OF WATER WELL: Fraction		Section Number Township No			nge Number	
County: Contracte "NO" NO" NO "SE				/2	T 3/	SR	7 DE BW
2 WELL OWNER: Last Name:  Business: Black River Forms  First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:							
Addmss					tersection): If at ov	mer's address,	check here:
Address:					section or	3	E SALTE SING
Address: P.O. Box 180  Address: Francis State: MN ZIP: 55070 Go BAST 1 mile & well is on The South Site  City: ST. Francis State: MN ZIP: 55070							
3 LOCATE WELL A DEPTH OF COMPLETED WELL. 75 & 5 Lottende: (decimal degrees)							
WITH "X" IN	Depth(s) Groundwater	Encountered: 1)	A	Lautuu	de:		
SECTION BOX:	2) ft.	Horizont	al Datum: WG	S 84 □ NAD	83   NAD 27		
N	WELL'S STATIC WA	Source for	or Latitude/Longit	nde:			
	below land surface	GPS	(unit make/mode	ık	)		
NWNE	above land surface, measured on (mo-day-yr)				(WAAS enabled	Yes 🔲	No)
	Pump test data: Well water was ft. after				d Survey Top		
W E			ine Mapper:		·····		
SW SE	Well water was						
	Estimated Yield:			6 Elevation	on:	. l.ft. ☐ Groun	Level   TOC
8	Bore Hole Diameter: (0.72 in. to 7.5 ft. and				Land Survey		
1 mile  in. to ft.							
7 WELL WATER TO BE USED AS: 1. Domestic: 5.  Public Water Supply: well ID							
1. Domestic:	5. ☐ Public w 6. ☐ Dewateri		le: well ID				
Lawn & Garden	7. Aquifer I		d Uncased				
☐ Livestock	8. Monitori	12. Geother	mal: how many b	ores?			
2. Irrigation	9. Environmen		ed Loop 🔲 Hori				
3. Teedlot	☐ Air Sparge ☐ Soil Vapor Extraction				n Loop 🔲 Surfac		
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 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							
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)  SCREEN-PERFORATED INTERVALS: From							
GRAVEL PACK INTERVALS: From .75							
9 GROUT MATERIAL: Neat coment Coment grout Bentonite Other							
Grout Intervals: From							
Nearest source of possible contamination:							
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abardoned Water Well							
Sewer Lines							
Colon (Granita)							
Direction from well? Distance from well?							
10 FROM TO	LITHOLO	OGIC LOG	FROM	TO I	ITHO. LOG (con	t.) or PLUGGI	NG INTERVALS
0 5	Brn Sand	70/ Soil					
5 50	white sandy						
50 70 70 75		y clay is 1	( (				
	Black Clay					-	
1, .			<del></del>			+	
	· · · · · · · · · · · · · · · · · · ·		Notes:				
	Shop well						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, $\Box$ reconstructed, or $\Box$ plugged							
under my jurisdiction and was completed on (mo-day-year)							
under the business name of Craudi S. Marker well Figure							
Mail 1 white copy al	ong with a fee of \$5.00 for	ach constructed well to: K	ansas Department	of Health and	noninent, pur	Watter, GWT	S Section,
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Enformment, Bureau of 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Tele						Telephone 785-29	<del>6-5</del> 524.
	e gov/waterwell/index html		KSA 820-12			Devrie	ed 7/10/2015