WATER WELL RECORD Form WWC-5 Division of Water								
Original Record					ources App. No.		Well ID	
1 LOCATION OF V			Fraction		ction Number	Township Numb		
County: Con			1/4 SW 1/4 SW	14 NW/4	27	T 33 S		
2 WELL OWNER: Last Name: Carcisle First: Roy Street or Rural Address where well is located (if unknown, distance and								
Business: I direction from nearest town of intersection). If at owner's address, check here.								
Address								
City: Rancho	Cordova	State: CA	9 ZIP: 95670	on Rd.	22 8 14	mile BAST	To well	
3 LOCATE WELL								
WITH "X" IN	4 DEPTH OF COMPLETED WELL: 65 ft. 5 Latitude:							
SECTION BOX:	Depth(s) Groundwater Encountered: 1) ft. Longitude:							
WELL'S STATIC WATER LEVEL: 30 Source for Latitude/Longitude:								
	below land surface, measured on (mo-day-yr). 11-17-2020					GPS (unit make/model:		
NWNE	above la	and surface	e, measured on (mo-day	/-yr)	.	(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map		
x 1 1			water was					
W E	after	after hours pumping gpm						
SW SE		Well water was ft.						
		after hours pumping						
S	Estimated Y	Bore Hole Diameter: 10.38. in. to						
1 mile	Bore Hole L	in. to						
7 WELL WATER TO	RE LISED		III. to	14.			, Ad	
1. Domestic:			ater Supply: well ID		10. 🗆 Oil F	Field Water Supply: le	ease	
Household	□ Public Water Supply: well ID □ Dewatering: how many wells?					10. Oil Field Water Supply: lease		
Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical			
Livestock	8. Monitoring: well ID				12. Geothei	12. Geothermal: how many bores?		
2. Irrigation	9. Er	9. Environmental Remediation: well ID				a) Closed Loop		
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction b) Open Loop ☐						scharge 🔲 Inj. of Water	
4. Industrial		Recovery	☐ Injection		13. 🗌 Othe	r (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 X PVC ☐ Other								
Casing diameter								
Casing height above land surface in. Weight SDR lbs./ft. Wall thickness or gauge No								
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								
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
SCREEN-PERFORATED INTERVALS: From								
GRAVEL PACK INTERVALS: From 6. to 1. from 1. from 1. to 1. from 1. to 1. from 1. to 1. from 1. to 1. from 1. from 1. to 1. from 1. to 1. from 1. to 1. from 1. to 1. from 1. from 1. to 1. from 1. fro								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possible contamination:								
Septic Tank		Lateral Line	es		Livestock Pens	☐ Insection	eide Storage	
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedvard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
Other (Specify)								
Direction from well?	7.77		Distance from v			ft.		
10 FROM TO		ITHOLOG		FROM	TO L	THO. LOG (cont.) or	PLUGGING INTERVALS	
0 4			73P Soil					
4 25 25 40		MAKE					4.44	
25 40	Fine S		red					
40 45 45 57 57 65	Red S					Addison		
45 57	Fine S		Ked					
57 65	Red 5	hale						
	Notes:							
11 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 my jurisdiction and was completed on (mo-day-year)								
Kansas Water Well Contractor's License No. 672 This Water Well Record was completed on (mo-day-year) 12-2-2020 under the business name of Crowd's Water Well Sylven								
under the business flatt			שרוו שלמן וערשהת					
Mail I white conv al	ong with a fee of	\$5.00 for eac	ch constructed well to: K	msas Departmen	t of Health and In	vironment. Barran	ater, GWTS Section.	
	ong with a fee of	\$5.00 for eac	ch constructed well to: Ka 66612-1367. Mail one to	nsas Departmen	t of Health and En	vironment, Bureau of Wa	ater, GWTS Section,	