WATER WELL RECORD (WWC-5) WELLID Constructed ✓ Original Record ☐ Correction ☐ Change in Well Use LOCATION OF WATER WELL Fraction NW % NW % NE % 37.162529 -99.749070 33 S Range Latitude Longitude Section Township County Datum CLARK Elevation **NEAREST SOURCE OF POTENTIAL CONTAMINATION** WATER WELL OWNER **WELL WATER USE** CAROLYN DEGNAN Domestic-Livestock Name Direction Distance COMPLETION ft. from well; Business from well; 2174 COUNTY RD 21 80 ft. Depth of completed well: Source Address ASHLAND KS 67831 Depth(s) groundwater encountered: description: (1) _____ ft.; (2) ft.; Source: COUNTY RD U & COUNTY Well location (3) ft.; (4) ☐ dry well Direction Distance ft. from well: RD 21. GO SOUTH 1 MILE from well: Static water level in well: 30 ft. & WEST .40 MILES & at owner's Source measured below land surface description: address SOUTH INTO 50 FT on (mm/dd/yy): ✓ No potential source of contamination CONSTRUCTION measured above land surface within 100 feet. on (mm/dd/yy): Borehole diameter: Borehole interval: PERMIT & ID NUMBERS (AS REQUIRED) from 0 to 80 ft. 10.6 in. Estimated yield: 40 gpm from _____ to ____ ft. DWR Application No.: _in. Water level was: ft. after hours KDHE / EPA Project Code: ___ 24 in. pumping gpm Casing height above land surface: Site Name: Pump installed? ☐ Yes ☐ No If casing height is less than 12 in. KDHE UIC Class V Form Completed: ☐ Yes ☐ No has a variance been approved?* ☐ Yes ☐ No *variance not required for monitoring Water well disinfected? ✓ Yes □ No County Permit: Yes No Permit ID: or environmental remediation wells Date disinfected (mm/dd/yy): Lease Name & Well #: Casing type: Thermal Plastics (ex. PVC) # of boreholes: ____ # of dewatering wells: _ Aquifer, if known: Blank casing interval: 80 ft. to 75 ft. Blank casing diameter: LITHOLOGIC LOG Soil Constituent Casing joints: Glued **Other Details** To From or Rock Type ____Ibs/ft. Weight: TAN TOPSOIL 0 14 Topsoil Wall thickness or gauge no.: Blank casing interval: 25 ft. to RED CLAY 14 20 Clay Blank casing diameter: 5 in. FINE TAN SAND 20 31 Sand Casing joints: Weight: Ibs/ft. RED CLAY 31 80 Clay Wall thickness or gauge no.: Grout interval: 0 ft. to 21 ft. Grout material: Bentonite Grout interval: ft. to ft. COMMENTS (Attach lithologic log if more rows are needed) Grout material: Screen/perforation PVC material: Screen/perforation openings: CONTRACTOR'S OR LANDOWNERS CERTIFICATION Screen/perforation intervals: This water well was constructed ✓ reconstructed ☐ pursuant to the stated water well From 75 ft. to 25 ft. contractor's license and was completed on 11-29-2022 . I certify that this record is true to Slot size ____ unit the best of my knowledge and belief. This water well record was completed on _ From ft. to ft. **CROWDIS WATER WELL SERVICES** under the business name of Slot size unit Kansas Water Well Contractor's License No. 672 under the authority of the designated

the designated person at its submittal:

Gravel pack intervals:

Gravel pack not used:
Gravel size _____ in

Gravel pack not used:
Gravel size _____in

From 80 ft. to 21 ft.

From ft. to ft.

Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c