WATER WELL RECORD Form WWC-5							Division of Water						
Original Record Correction Change in Well Use					se	Resources App. No.					ell ID		
1 LOCATION OF WATER WELL: Fraction SW4 SW4 SW4 SW4						Section Number   Township Number   Range Number   R 33							
2 WELL OWNER: Last Name: First:							Street or Rural Address where well is located (if unknown, distance and						
	National Beei			rirst:		irection from nearest town or intersection): If at owner's address, check here:							
	1501 E 8th S					difection in	MII INC	THEST TOWN OF	micisculon). Il al Ol	ilei sac	iui coo, i	check field.	
Address:													
City:	Liberal		State: KS	7									
3 LOCATI		4 DEPTH	OF COM	APLETED	WELL:	195.5	. ft.	5 Latitu	de: 37.061	5361		(decimal degrees)	
WITH "2 SECTIO		Depth(s) Gr	oundwater	Encountered	k I) <u>1</u>	70 ft.		Longi	tude: -100.9	033944		(decimal degrees)	
	N 2)							Horizo	ntal Datum: WG	S 84 🗆	NAD	83 - NAD 27	
·	WELL'S STATIC WATER LEVEL:						Source for Latitude/Longitude: -yr) 3-23 2018  GPS (unit make/model: IPHONE						
	below land surface, measured on (  -NWNE above land surface, measured on (					·yr)	■ GI						
NWNE										S enabled? Yes No)			
w  <del>=   -  </del>	w after hours pumping									Map			
"	Well water was						Commo mapper						
5w								6 Flour	tom. 2827.14	A (	Constant	U anal El TOC	
	Estimated Yield:1 to  Bore Hole Diameter:			gpm 5in. to195.5 ft. and				6 Elevation: 2827.14					
Bore Hole Diameter:								Bource	Other				
7 WELL WATER TO BE USED AS:													
1. Domestic: 5. Public Water Supply: well ID													
☐ Household 6. ☐ Dewatering: how many we							•••	11. Test I	iole: well ID			••••	
☐ Lawn & Garden 7. ☐ Aquifer Rechai					ell ID	A&. 45	•••	☐ Ca	sed 🔲 Uncased	☐ Geot	echnica	រា	
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID								ermal: how many b				
2.  Irrigation				al Remediat			•••		osed Loop				
_	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E. 4. ☐ Industrial ☐ Recovery ☐ Injection							b) Open Loop Surface Discharge Inj. of Water					
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 heigh	t above land	surface	0 i	n. Weigh	ıt93	lbs.	ft.	Wall thick	ness or gauge No.	CH BO			
TYPE OF S	CREEN O	R PERFORA	TION MA	TERIAL:									
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)													
Brass		vanized Steel	_	crete tile	☐ None	used (open	hole)	)					
•	uous Slot	ATION OPE Mill Slot				C [	٦.	مداملا لممالك	Other (Specify)				
		☐ Key Punc		uuze wrapp Vice Wranne	4 D 2	orest Cut	אם ב זים ר	one (Open H	ole)		•••••		
SCREEN-F	ERFORAT	ED INTERV	ALS: From	m 175,5	ft. to 195.5	ft. Fro	m	ft. to	ft From		ft. to	, ft.	
G	RAVEL PA	CK INTERV	ALS: Fro	m . 171	ft. to . 195	5 ft., Fr	m	ft. to		1	ft. to	fl.	
GRAVEL PACK INTERVALS: From													
Grout Interv	ıls: From	ft. to							fl. to				
	-	k contaminat		_	1 nv. n .						٥.		
Sewer			Lateral Lin Cess Pool		] Pit Privy ] Sewage L	ngoon.	_	Livestock Pe Fuel Storage		ecticide andonec			
· —	ght Sewer L		Seepage Pi		Feedyard	agoon		Fertilizer Sto		Well/G			
Direction from well?													
Direction fro	m well? .!!			Dist	ance from v	vell?							
10 FROM	TO			GIC LOG		FROM	_	то	LITHO. LOG (con	.) or PL	UGGIN	IG INTERVALS	
	6	silty sand brown				185		195.5	sand brown				
	43	sandy clay brow					$\dashv$						
43 60	60 76	sand dark brown silty sand brown					-						
76	115	clayey sand brown					-						
115	144	silt fine sand light brown					$\dashv$						
144	159	siky clay brown				Notes	Notes:						
159	172	gravel and sand brown					Northing 1465175.57 Easting 611074.23						
172													
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) 3-23-2018 and this record is true to the best of my knowledge and belief.													
Kansas Wa	Kansas Water Well Contractor's License No. 597 This Water Well Record was completed an tho-day year 5.51.2018												
under the business name of Cascade drilling LP  Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,													
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.													
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.  Visit us at http://www.kdheks.gov/waterwell/index.html  KSA 82a-1212  Revised 7/10/2015													

