WATER WELL RECORD	Form V	VWC-5		r Resources App. No		
1 LOCATION OF WATER WE		1/4 1/4	Section Number	Township No. T 34 S	Range Number R □E ☑W	
County: Corper				L		
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here						
2 WATER WELL OWNER: Randy Lank RR#, Street Address, Box #: 80574 McClarked.			Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27 Collection Method: ☐ GPS unit (Make/Model:)			
City, State, ZIP Code : 1	Manchester, OX 73	3758 	Digital Map/Ph	oto. Topographic	: Map, Land Survey	
3 LOCATE WELL WITH AN "X" IN 4 DEPT	TH OF COMPLETED WE	LL 40	ft.	0 "	2)	
SECTION BOX: Depth(s) N WELL'S	WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr					
EST. YI	Pump test data: Well water was					
Bore Hole Diameter						
Domestic Feedlot Oil field water supply Dewatering Other (Specify below) SWSE Domestic Feedlot Oil field water supply Dewatering Other (Specify below) SWSE Irrigation Industrial Domestic-lawn & garden Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No						
S If yes, mo/day/yr sample was submitted						
5 TYPE OF CASING USED: Steel PVC Other						
CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 5 in to 40 ft., Diameter in to in						
Brass Galvanized Steel None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:						
Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☒ Saw cut ☐ Other (specify) SCREEN-PERFORATED INTERVALS: From 40						
From						
From						
Grout Intervals: From						
1 hand 1	Lateral lines	Livestock Fuel storag	e	d water well	er (specify below)	
Direction from well		Distance	from well			
	HOLOGIC LOG Fine Sand	FROM	TO LITHO. L	OG (cont.) <u>or</u> PLU	IGGING INTERVALS	
S 10 Fine Sans	& Black Soil					
10 15 Minday: +	Jane Sand					
15 20 Medium 20 75 Medium	Sand Sand			was the first and the second s		
25 32 Medium	Sand					
	rd Sand					
				34-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-		
7 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 the business name of TISO K.W. (1931) by (signature)						
INSTRUCTIONS: Use ty pewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. I nelude fee of \$5.00 for each constructed well. Vi sit us at						
http://www.kdheks.gov/waterwell/index.html. KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy						