WATER WELL RECORD Form WWC-5 Division of Water												
✓ Original Record ☐ Correction ☐ Change in Well Use						Resour	ces App. No		Well ID	L		
1 LOCATION OF WATER WELL: Fraction						Section	on Number	Township Numb	er Ran	ge Number		
County: Meade NE ¼ SW ¼ SW ¼ N												
2 WELL	OWNER: L	ast Name: Go	odnight	First: Greg		t or Rural Address where well is located (if unknown, distance and						
Business	Business: direct							ion from nearest town or intersection): If at owner's address, check here:				
	P. O. Box 2	26			Center w	vell F	From inter	section Rd. 31 and	IRd FF 9	South 1.4 mi		
Address: City:	Englewoo	ď	State: KS	ZIP: 67840	OCITICI V	VCII. I	· · · · · · · · · · · · · · · · · · ·	scouon ra. or and	* 1 (d. LL, \	JOGUT 1.4 IIII.		
3 LOCAT						·I						
WITH "				APLETED WELL:								
	ON BOX:			Encountered: 1)		(attention)						
1	2)						Datum:	☐ WGS 84 ☐ NA	D 83 🛛 N	AD 27		
		WELL'S STATIC WATER LEVEL:				2020		for Latitude/Longitude				
	,,,,,	above land surface, measured on (mo-day-yr)					· · · · · / ·					
	NE	Pump test data: Well water was ft.					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
WX	Е		after hours pumping gpm				Online Mapper:					
''	Well water was					Опшие гларрет.						
SW	SE	after	hour	pumpinggpm			2168					
Estimated Yield:				gpm			6 Elevation: 2168ft. ☑ Ground Level ☐ TOC					
1	S Bore Hole Diameter:19 in. to					ft. and Source: \square Land Sur			urvey GPS Topographic Map			
1 mile in. to ft. ☑ Other KOLAR												
7 WELL WATER TO BE USED AS:												
1. Domestic	Domestic: 5. ☐ Public Water Supply: well ID											
_	☐ Household 6. ☐ Dewatering: now many wells?						11. Test Hole: well ID					
1	☐ Livestock Aquiter Recharge: Well ID											
2. Irrigation 9. Environmental Remediation: well ID												
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction							b) Open Loop Surface Discharge Inj. of Water					
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 77 PVC Steel 77 PVC Other CASING IOINTS: 77 Glued Clamped Steel 77 PVC Other												
Casing diameter 5 in. to 45 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 12 in. Weight lbs./ft. Wall thickness or gauge No. SDR21												
Casing height above land surface 12 in. Weight 1bs./ft. Wall thickness or gauge No. SDR21												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
☐ Continuous Slot ☑ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From .20 ft. to .45 ft., From ft. to ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From 4 ft. to 24 ft., From ft. to ft., From ft. to ft.												
Nearest source of possible contamination: ✓ No potential source of contamination within 200 ft. ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage												
□ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage □ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well												
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other	(Specify)	•••••		*************************								
Direction from well?												
10 FROM	TO		LITHOLO	GIC LOG	FRON	И		ITHO. LOG (cont.) o		G INTERVALS		
0		Brown Clay										
22	45	Medium Sai	nd	- ,								
					Notes:	:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, \(\mathbb{I} \) reconstructed, or _ plugged												
under my jurisdiction and was completed on (mo-day-year) .01/13/2020 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 533 This Water Well Record was completed on (mo-day-year) .03/12/2020												
under the k	uci well Col	nractor S LIC	n Water V	Vell This W	ater Well	Kecor	u was com	pietea on (mo-day-y	ear) .VA/.JA	14V4Y		
under the t	rusincos nalli	Send one conv	to WATER W	VELL OWNER and retain	one for you	r record	s. Fee of \$5 f	0 for each constructed w	ell			
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.												
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212												