WATER WELL R		WWC-5		Division of W					
Original Record		e in Well Use		esources App			Well ID		
1 LOCATION OF W. County: REPUBLI		Fraction SW 1/4 SW 1/4 SW 1/4		Section Nun 27	nber To	wnship Numb T 4 S		ige Number	
2 WELL OWNER: Last Name: NELSON First: COREY Street or Rural Address where well is located (if unknown, distance and									
Business: Address: 2252 YOUNG ROAD direction from nearest town or intersection): If at owner's address, check here:									
Address: City: CLYDE	State: KS	ZIP: 66938							
3 LOCATE WELL			NI/A	G = v		30 66940	11		
WITH "X" IN	4 DEPTH OF COMPLETED WELL: N/A ft. Depth(s) Groundwater Encountered: 1)							(decimal degrees)	
SECTION BOX:	2) ft. 3) ft., or 4) ☐ Dry Well				Longitude: -97.526629 (decimal degrees) Horizontal Datum: □ WGS 84 ■ NAD 83 □ NAD 27				
17	WELL'S STATIC WATER LEVEL:					tude/Longitude:		33 LI NAD 27	
	below land surface, measured on (mo-day-yr)				GPS (unit make/model: GARMIN)				
NW NE	above land surface, measured on (mo-day-yr)				(WAA	AS enabled? 🔲	Yes N	0)	
W E	Pump test data: Well water was				☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
98 98 7	Well water was ft.								
SW SE	after hours pumping gpm								
	Estimated Yield:gpm				6 Elevation: 1402ft. ■ Ground Level □ TOC				
S	Bore Hole Diameter: in. to ft. and				Source: ☐ Land Survey ■ GPS ☐ Topographic Map ☐ Other				
7 WELL WATER TO		in. to	Tt.						
1. Domestic:		er Supply: well ID		10 🗆	Oil Field W	ater Supply: Jo	0.00		
Household	Public Water Supply: well ID Dewatering: how many wells?				10. ☐ Oil Field Water Supply: lease				
Lawn & Garden	7. Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical				
Livestock	8. Monitoring: well ID				othermal: ho	ow many bores	?		
2. Irrigation	9. Environmental Remediation: well ID				Closed Loop	Horizonta	I 🗌 Vertic	al	
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapor Extraction b) Open ☐ Recovery ☐ Injection 13. ☐ Other					Surface Dis	charge \square	Inj. of Water	
		Injection				fy):			
Was a chemical/bacterion Water well disinfected?		tted to KDHE?	Yes ∐ No	o If yes, da	ate sample	was submitted	l:		
8 TYPE OF CASING U		. D 04h	CAS	INIC IODIO	rc. 🗆 🖰	1.00			
Casing diameter 6	in to f	, □ Ottler Diameter	in to	IND JOHN	ameter	in to	□ Welded	☐ Threaded	
Casing diameter 6. in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. Weight 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 ☐ 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									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From 0 ft. to 28 ft., From ft. to ft., From ft. to ft., From ft.									
Nearest source of possible of	contamination:								
☐ Septic Tank ☐ Sewer Lines	☐ Lateral Lines			Livestock I		☐ Insecticio			
☐ Watertight Sewer Lines	☐ Cess Pool Seepage Pit	☐ Sewage Lag ☐ Feedyard] Fuel Storag] Fertilizer S		☐ Abandon		ell	
☐ Other (Specify)									
10 FROM TO	LITHOLOG		FROM	TO	LITHO. L	OG (cont.) or P	LUGGING	INTERVALS	
			0	3	TOP SO				
			3	4		ETE CAP			
			4	9		ITONITE CH	IPS		
			9		GRAVEL				
						TO MEASU		RUE	
			Notar	TUE VA/ELL ^		OF THE WEL	L		
	Notes: THE WELL CAVED IN								
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) 03/27/2018 and this record is true to be nest of my knowledge and ballef									
Kansas Water Well Contractor's License No. 480 This Water Well Record was completed on (po-day year) 05/04/2018									
under the business name of Williams Drilling CoInc. Signature Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environmental Bureau.									
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									