WATER WI	ELL REC	ORD	Form W	WC-5	Division of Wate	r Resources App. N	0,		
1 LOCATION OF WATER WELL:			Fraction		Section Number	Township No.	Range N	ımber	
County: REPUBLIC			1/4 SE 1/4 NE		5	T 4 S	R 3	□E <b>▽</b> W	
			f unknown, distance	Global Positioning System (GPS) information:					
from nearest town or intersection: If at owner's address, check here					Latitude: .39,730139 (in decimal degrees)				
COUNTY ROADS 15 AND U					Longitude: -97.671278 (in decimal degrees)				
					Datum: WGS 84, V NAD 83, NAD 27				
2 WATER WELL OWNER: KANSAS LAND AND CATTLE					Collection Method:				
RR#, Street Address, Box #: 845 US HWY 36					GPS unit (Make/Model:)				
City, State	, ZIP Code	SCAND	IA, KS, 66966		☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey  Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m				
3 LOCATE V	VIDI I	· · · · · · · · · · · · · · · · · · ·			Est. Accuracy: [] <	3 m, [ ] 3-5 m, [ ]	5-15 m, L	>15 m	
WITH AN	XX" IN	4 DÉPTH OF C	COMPLETED WEI	J. 80	ft				
SECTION I						ft. (2) ft. (3) ft.			
N	N WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/y								
		Pump	test data: Well wat	er was	asft. after hours pumping gpm				
NW			gpm. Well water wasft. after hours pumping gpm						
w			eter 1.0in. to .80ft., andin. toft. TO BE USED AS: Public water supply Geothermal Injection well						
							njection w		
SW	- OE I		Feedlot   Industrial	r supply $\square$ De	watering Z	Other (Spec	cify below)		
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well STOCK								***********	
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No  If yes, mo/day/yr sample was submitted									
Water well disinfected? Yes No					******				
5 TYPE OF CASING USED: ☐ Steel ☑ PVC ☐ Other									
Casing diameter .5 in. to .40									
Casing height above land surface. 18 in., Weight 2.893 lbs./ft., Wall thickness or gauge No265									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☑ PVC ☐ Other (Specify)									
☐ 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 ft. to 80 ft., From ft. to ft.									
From									
GRAVEL PACK INTERVALS: From									
From ft. to ft., From ft. to ft.									
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ✓ Bentonite ☐ Other									
Grout Intervals: From .3 ft. to .25 ft., From ft. to ft., From ft. to ft.									
1		of possible conta			,	. 🗆	/ : :0	1 1 5	
Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)  Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well									
Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well									
					from well				
FROM TO		LITHOLOG		FROM	TO LITHO. L	OG (cont.) <u>or</u> PLU	JGGING I	NTERVALS	
0 4	TOP SO	OIL							
4 17	LIMEST							The transmission of the second	
17 64		GRAY CLAY L	IGHT						
64 65		TONE LAYER				OANOMA SERVICIO A CONTRACTO A CONTRACTOR A CONT			
65 72		TONE FINE SA				- Andrews - Andr		· · · · · · · · · · · · · · · · · · ·	
72 76		STONE LIGHT	GRAY CLAY						
76 80	GRAY	ULAY					***************************************	<u></u>	
			and the state of t						
		and the second s							
7 CONTRAC	CTOR'S OR	LANDOWNE	R'S CERTIFICATI	ON: This water	er well was 🖊 const	ructed. reconst	ructed or [	nlugged	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \( \bigcirc\) constructed, \( \bigcirc\) reconstructed, or \( \bigcirc\) plugged under my jurisdiction and was completed on (mo/day/year) 04/15/2013 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 39227 This Water Well Record was completed on (mp/play/yea/f) 04/15/2013									
under the bus	iness name c	of WILLIAMS	DRILLING CO., IN	Ç	by (signature) (.)	Don Will	Camo	<i>y</i>	
INSTRUCTION	NS: Use ty pewi	riter or ball point per	n. PLEASE PRESS FIRM	ILY and PRINT cle	early. Please fill in blank	s and check the corre	ct answers.	Send three copies	
(white, blue, pir	ık) to Kansas De	epar tment of Health	i and E nyironment, Burea	iu of Water, Geol	ogy Section, 1000 SW J	aokson St., Suite 420,	торека, ка	18as 666 12-1367.	
Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed, well. Vi sit us at http://www.kdheks.gov/waterwell/index.html.									
KSA 82a-1212	XS OF 2	7	HHOU		Check: W	hite Copy, D	lue Copy,	Pink Cop	