

Please Levise

		RECORD		WWC-5	113	6363		ion of Water	48281] ,,,,,,,,,,											
				e in Well Use				rces App. No.	Township Num	Well ID	inge Number										
1 LOCATION OF WATER WELL: County: Rawlins			Fraction NW1/4 SW1/4	/ CIA:1/-	Section Number 9		T 4 S		inge Number 32 □ E 🛛 W												
	OWNER:	Last Names		First:	, OTT /		r Pura														
Business:	FITSU:			Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:																	
Address:					1																
Address: Rd BB City: Herndon State: KS ZIP: 67739							intersection of Rd K & Road 27 (Wew # 4)														
City:	ZIP: 67739				··	(-															
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:11.0 ft. 5 Latitude:											(decimal degrees)										
l .	WITH "X" IN SECTION BOX: Depth(s) Groundwater Enco							Longitu	ide: 100.9	268											
SECTION				3) ft.,					Z WGS 84 □ NA												
'	,	WELL'S ST	WELL'S STATIC WATER LEVEL:63				t.	3 Source for Latitude/Longitude: GPS (unit make/model:													
		☑ below la	below land surface, measured on (mo-day-yr)				4/2013														
NW		above land surface, measured on (mo-day-yr) pump test data: Well water was				(,															
								☐ Land Survey ☐ Topographic Map ☐ Online Mapper:													
				hours pumping gpm Well water was ft.				□ Oпше маррет													
after hou				s pumpinggpm			2036														
K Estimated Yield: 70			ield∙ 70	gnm			6 Elevation: 2936ft. Ground Level TOC														
S Bore Hole Diameter: .				12 in. to 110 ft. and			Source: ☐ Land Survey ☐ GPS ☐ Topographic Map ☐ Other KOLAR														
	nile			in. to .		ft.			Zi Omer ASSESSA												
7 WELL WATER TO BE USED AS:																					
1. Domestic			ater Supply: well ID			10. Oil Field Water Supply: lease															
					g: how many wells?echarge: well ID				11. Test Hole: well ID												
. —						1 ID			mal: how many bor												
_	2. ✓ Irrigation 9. Environmental Remediation: well ID								ed Loop Horizon												
					☐ 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? VI Yes I No																					
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded																					
Casing diameter 8 in to 70 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 18 in Weight 5.594 lbs/ft. Wall thickness or gauge No. 332																					
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:																					
	nuous Slot	☐ Mill Slot		auze Wrapped	ПΤ	orch Cut	□ Dri	illed Holes [☐ Other (Specify)												
Louve	ered Shutter	☐ Key Punch	ed □W	ire Wrapped	17 1 S	aw Cut	П №	one (Open Hol	e)												
SCREEN-PERFORATED INTERVALS: From .70							ft. t	.o ft.													
G	RAVEL PA	ACK INTERVA	ALS: Fron	n20 ft. t	o11	.O ft., F	rom	ft. to .	ft., From	ft. 1	to ft.										
9 GROUT	「 MATERI	AL: Neat c	ement [] Cement grout	∠ B	Bentonite	☐ Otl	her													
Grout Intervals: From																					
		ble contaminatio		D:	D			Secretarily David	□ t	:-:											
☐ Septic Tank ☐ Lateral Lines ☐ Sewer Lines ☐ Cess Pool								Livestock Pens													
☐ Watert					Fertilizer Storage																
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)																					
	om well?				from v																
10 FROM	ТО		ITHOLOG	GIC LOG		FRO	OM	TO L	ITHO. LOG (cont.)	or PLUGGI	NG INTERVALS										
0	2	surface																			
2	20	loess																			
20	67	clay & caliche			- Aud :																
67	75		ne & med sand w/clay & caliche strks																		
75 95	95 110		ne & med sand w/clay lenses ellow ochre/blakc shale																		
30	110	yellow ocnre	ibiakc sh	ale		NI -4-	NO:		·····												
Notes:																					
											-										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or plugged																					
under my i	urisdiction	and was comple	eted on (n	no-dav-vear)	04/03/	2013	and th	his record is	true to the best of r	ny knowle	dge and belief.										
Kansas Wa	iter Well Co	ontractor's Lice	nse No	554	This W	ater We	ll Reco	ord was comp	true to the best of rolleted on (mo-day-	(ear) .05/0	.1/2013										
under the business name of Wooffer Pump & Well, Inc.																					
KS Departi	ment of Health									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.											