

**WATER WELL RECORD****Form WWC-5**☒ Original Record ☐ Correction ☐ Change in Well UseDivision of Water  
Resources App. No.

11,620

Well ID

**1 LOCATION OF WATER WELL:**

County: Republic

Fraction

SE ¼ NE ¼ NE ¼ NW ¼

Section Number

17

Township Number

T 4 S

Range Number

R 4 E ☒ W**2 WELL OWNER:** Last Name: Larson

Business: Swedish Acres, Inc.

Address: 735 90 Road

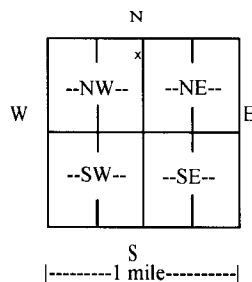
Address:

City: Scandia

State: KS

ZIP: 66966

First: Larry

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: ☐  
Approximately 1 mile north and 0.5 miles west of Norway.**3 LOCATE WELL WITH "X" IN SECTION BOX:****4 DEPTH OF COMPLETED WELL:**

66 ft.

Depth(s) Groundwater Encountered: 1) ft.

2) ft. 3) ft. or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL: 7.70 ft.

☒ below land surface, measured on (mo-day-yr) 02-11-20☐ above land surface, measured on (mo-day-yr)

Pump test data: Well water was not checked ft.

after hours pumping gpm

Well water was ft.

after hours pumping gpm

Estimated Yield: gpm

Bore Hole Diameter: 24 in. to 66 ft. and in. to ft.

**5 Latitude:** 39.710146

(decimal degrees)

**Longitude:** -97.792143

(decimal degrees)

Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☒ NAD 27

Source for Latitude/Longitude:

☒ GPS (unit make/model: )(WAAS enabled? ☒ Yes ☐ No)☐ Land Survey ☐ Topographic Map☐ Online Mapper:**6 Elevation:** Unknownft. ☐ Ground Level ☐ TOCSource: ☐ Land Survey ☐ GPS ☐ Topographic Map☐ Other**7 WELL WATER TO BE USED AS:**

1. Domestic:

☐ Household☐ Lawn & Garden☐ Livestock2. ☒ Irrigation3. ☐ Feedlot4. ☐ Industrial5. ☐ Public Water Supply: well ID6. ☐ Dewatering: how many wells?7. ☐ Aquifer Recharge: well ID8. ☐ Monitoring: well ID

9. Environmental Remediation: well ID

☐ Air Sparge ☐ Soil Vapor Extraction☐ Recovery ☐ Injection10. ☐ Oil Field Water Supply: lease

11. Test Hole: well ID

☐ Cased ☐ Uncased ☐ Geotechnical

12. Geothermal: how many bores?

a) Closed Loop ☐ Horizontal ☐ Verticalb) Open Loop ☐ Surface Discharge ☐ Inj. of Water13. ☐ 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 ☒ PVC

CASING JOINTS:

☒ Glued ☐ Clamped ☐ Welded ☐ Threaded ☐ Other

Casing diameter 16 in. to 47 ft., Diameter 16 in. to 65 ft., Diameter in. to ft.

Casing height above land surface 12 in. Weight 19.75 lbs./ft. Wall thickness or gauge No. .616

**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 47 ft. to 61 ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 33 ft. to 66 ft., From ft. to ft., From ft. to ft.

**9 GROUT MATERIAL:**☐ Neat cement☐ Cement grout☒ Bentonite☐ Other

Grout Intervals: From 0 ft. to 33 ft., From ft. to ft., From ft. to ft.

**Nearest source of possible contamination:**☐ 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) None Known

Direction from well?

Distance from well?

ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	4	Sandy topsoil			
4	8	Sand, fine			
8	10	Clay, brown			
10	28	Sand & gravel, medium to fine			
28	36	Clay, gray, green and tan			
36	61	Sand & gravel, medium to fine			
61	66	Weathered Shale			
			Notes:		

**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) 02-11-20 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 185

This Water Well Record was completed on (mo-day-year) 02-14-20

under the business name of Clarke Well &amp; Equipment, Inc.

Signature

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 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.izov/waterwell/index.html>

KSA 82a-1212

Revised 7/10/2015