			WWC-5		sion of Water							
			ge in Well Use		urces App. No.		Well ID					
		VATER WELL:	Fraction	Section Number Township N				ge Number				
	y: Thomas		1/4 NE 1/4 SE 1/4		21	T 7 S R 32 🗆 E 🗷 W						
2 WELL OWNER: Last Name: Black First: Cindy Street or Rural Address where well is located (if unkr												
Business	r's address,	check here:										
Address: 218 Willow Address: 61' from E line, 726' from S line												
City: Gem State: KS ZIP: 67734												
3 LOCATE WELL												
WITH "			MPLETED WELL:		5 Latitude:(decimal degrees)							
	ON BOX:	Depth(s) Groundwater	Encountered: 1)	ft.	Longitude:(decimal degrees)							
] 1	V	2) ft.	2) ft. 3) ft., or 4) 🗆 Dr			ory Well Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD						
	Т		WELL'S STATIC WATER LEVEL:ft. ☐ below land surface, measured on (mo-day-yr)				Source for Latitude/Longitude:					
	'		☐ GPS (unit make/model:									
NW	NE	above land surface										
w		Pump test data: Well v										
"	Е	after hours pumping										
SW	SE -4											
	S	Bore Hole Diameter:	Bore Hole Diameter: 8.5 in. to 240 ft.			and Source: Land Survey GPS Topograph						
1	mile		in. to ft.			Other						
7 WELL	WATER T	O BE USED AS:			tivid	The second secon	***************************************	**************************************				
1. Domestic	:	5. Public Wa	ater Supply: well ID		10. □ Oil F	ield Water Supply: 1	ease					
House		6. 🗌 Dewaterir	ng: how many wells?	*******		11. Test Hole: well ID						
☐ Lawn		7. 🗌 Aquifer R	echarge: well ID		☐ Case	□ Uncased □	Geotechnica	1				
Livest		8. 🗌 Monitorin	ng: well ID	.,		nal: how many bore						
2. Irrigat			al Remediation: well II			ed Loop 🔲 Horizon						
3. Feedlo		☐ Air Sparg		Extraction	Loop Surface D	ischarge 🔲	Inj. of Water					
4. 🗌 Indust	rial	☐ 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 C	F CASINO	G USED: Steel PV	C Other	CASIN	G IOINTS: I	Glued [] Clampe	d □ Welder	1 Threaded				
Casing diam	eter 4.5	in. to 240 ft	. Diameter	in. to	ft Diamete	er in. to	ft.	· La imeaded				
Casing diameter 4.5 in to 240 ft., Diameter in to ft. Casing height above land surface 18 in Weight 2.5 lbs./ft. Wall thickness or gauge No. 0.248												
TYPE OF	SCREEN O	R PERFORATION MA	TERIAL:			Ç						
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)												
☐ Brass		Ivanized Steel	crete tile \(\subseteq \text{None } \text{U}	sed (open hole)								
		RATION OPENINGS A	RE:									
	nuous Slot	☐ Mill Slot ☐ G	auze Wrapped 🔲 To	rch Cut 🔲 Di	rilled Holes [Other (Specify)						
Louve	ered Shutter	☐ Key Punched ☐ W	Vire Wrapped 📕 Sa	w Cut	one (Onen Hole	:)		i				
SCREEN-I	PERFORAT	TED INTERVALS: From	n . 40 ft. to .240	ft., From	ft. to	ft., From	ft. to	ft.				
G	RAVEL PA	CK INTERVALS: From	n 0 ft. to25	ft., From	ft. to	ft., From	ft. to	ft.				
9 GROUI	' MATERI	AL: ☐ Neat cement ☐	7 Cement grout 📁 Be	ntonite 🗀 Or	ther							
Grout Interv	als: From	0 ft. to 25	ft., From	ft. to	ft., From	ft. to	ft.					
Nearest sou	rce of possib	ole contamination:										
☐ Septic		☐ Lateral Line			Livestock Pens		cide Storage					
Sewer		☐ Cess Pool	☐ Sewage La		uel Storage		oned Water	Well				
	ight Sewer L		☐ Feedyard		Pertilizer Storag	ge ☐ Oil Wo	ell/Gas Well					
Direction for	opechy) om well?		Diatanas fran-			α.						
10 FROM	TO	LITHOLO	CICLOC		TO LI	ft	. DI LICORY	O INTERNALLE				
			OIC LOG	FROM		THO. LOG (cont.) o	r PLUGGIN	JINTERVALS				
0		Surface				ne sand		***************************************				
2	20	Loess	THE STATE OF THE S		131 Cl							
20	55	Clay & caliche				ne sand		MANUAL CONTRACTOR OF THE STATE				
55		Fine to med sand	***************************************			iliche & clay		Norman Mark Welship and programme and progra				
67	75	Clay				ne sand w/ calich	e					
75		Med sand & gravel			182 Cl	ay & caliche						
86	95	Caliche & clay		Notes:								
95	106	Fine sand										
106 117 Clay												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
Under my ulrisdiction and was completed on (mo-day-year) 7/7/15												
Kansas Water Well Contractor's License No. 838. This Water Well Record was completed on (morday-year) 8/1/15. under the business name of D&R Pump Service, LLC. Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureak of Water, GWTS Section,												
under the b	Lyhite cony a	long with a fee of \$5,00 fee	oh constructed well to 17	Sig	nature	1.14.N	<u>~3</u>	*********				
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 her	o d vv Jacksoff i	st., suite 420, Topeka, Kansas ts.gov/waterwell/index.html	00012-1307. Wall one to			or your records. Telepl						
L visit us at fitt	J.// www.kunes	a.gov/waterwell/index.ntml		KSA 82a-121	14		Kevised	7/10/2015				

			WWC-5		vision of Water							
					sources App. No	·····	Well ID					
		VATER WELL:	Fraction		ection Number		Township Number Rang					
	: Thomas		1/4 NE 1/4 SE 1/									
1	OWNER: I	Last Name: Black	First: Cindy	Street or R	et or Rural Address where well is located (if unknown, distance as							
Business	040 1400			direction from nearest town or intersection): If at owner's address,				check here:				
Address: Address:	218 Willo	W										
3 LOCAT	Gem	State, NO	ZIP: 67734		<u> </u>							
WITH "		4 DEPTH OF COM	PLETED WELL: ft. 5 Latitude:					(decimal degrees)				
SECTIO		Depth(s) Groundwater	Encountered: 1)	ft.		Longitude:(decimal degrees)						
SECTION			3) ft., or 4)		Horizon	Horizontal Datum: WGS 84 NAD 83 NAD 27						
-		WELL'S STATIC WA	Source 1	Source for Latitude/Longitude: GPS (unit make/model:)								
	1	below land surface										
NW	NE	above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)						
	1	Pump test data: Well v	Pump test data: Well water was ft.			☐ Land Survey ☐ Topographic Map						
W	E	after hours	after hours pumping gpm			Online Mapper:						
SW	SE	Well v	Well water was ft.									
	7		after hours pumping gpm			on: ft	C Ground	d I avol III TOC				
			imated Yield:gpm re Hole Diameter: in. to ft. and			6 Elevation:						
1 r	S aila t	l .				Other						
			in. to	π.		U Outer	************					
1		D BE USED AS:	An Constant Street		10 -	D' 11 W						
1. Domestic:			ter Supply: well ID			10. Oil Field Water Supply: lease						
☐ Lawn		o. Dewaterin	g: how many wells?	*****************	11. Test Ho							
☐ Lawn a		/. ☐ Aquiter R	echarge: well ID		☐ Case	ed Uncased U						
2. Irrigati		8. Monitorin	g: well IDal Remediation: well I	n	12. Geothe	rmal: how many bore						
3. \square Feedlo		9. Environment				a) Closed Loop						
				☐ Soil Vapor Extraction b) Open Loop ☐ Surface Discharge								
	4. Industrial Recovery Injection 13. Other (specify):											
		riological sample subm	uitted to KDHE? 🗆	Yes 🗌 No	If yes, date	sample was submitte	:d:					
		? ☐ Yes ☐ No										
8 TYPE C	F CASING	USED: ☐ Steel ☐ PV	C 🗌 Other	CAS	ING JOINTS:	☐ Glued ☐ Clamped	d 🗌 Welde	d Threaded				
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter												
Casing height above land surface												
TYPE OF S		R PERFORATION MA										
☐ Steel		inless Steel	glass 🔲 PVC		☐ Othe	r (Specify)						
☐ Brass		vanized Steel Conc		used (open ho	le)							
		RATION OPENINGS A										
	nuous Slot	☐ Mill Slot ☐ G	auze Wrapped 🔲 T	orch Cut 🔲	Drilled Holes	Other (Specify)		*********				
☐ Louve	red Shutter	☐ Key Punched ☐ W	ire Wrapped S	aw Cut 🔲	None (Open Ho	le)						
SCREEN-F	PERFORAT	ED INTERVALS: From	n ft. to	ft., From	ft. to .	ft., From	ft. to	, ft.				
G	RAVEL PA	CK INTERVALS: From	n ft. to	ft., From	ft. to	ft., From	ft. tc) ft.				
9 GROUT	`MATERL	AL: Neat cement] Cement grout 🔲 B	entonite 🔲	Other							
Grout Interv	als: From	ft. to	ft., From	. ft. to	ft., From	ft. to	ft.					
		le contamination:										
☐ Septic		☐ Lateral Line			Livestock Pen:	s 🔲 Insecti	cide Storage	;				
Sewer		☐ Cess Pool	☐ Sewage La] Fuel Storage		oned Water	Well				
	ight Sewer Li		☐ Feedyard		Fertilizer Stora	nge □ Oil We	ell/Gas Well	ı				
Other (Specify)											
Direction fro		I ADVIOLOGICA										
10 FROM	TO	LITHOLOG		FROM	TO L	LITHO. LOG (cont.) o	r PLUGGIN	G INTERVALS				
182		Fine to some med sar	<u>na</u>			***						
202		Clay										
206		Fine to some med sar										
220		Fine to med sand & g										
235	240	Black shale										
			and the state of t									
				Notes:			Annahira Annahira Annahira					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged												
under my ii	under my jurisdiction and was completed on (mo-day-year) 7/7/15 and this record is true to the best of my knowledge and belief											
Kansas Wa	ter Well Co	ntractor's License No. 8	338 This W	ater Well Re	ecord was comi	nleted on (manadayay	ear) 8/1/1	5				
Kansas Water Well Contractor's License No. 838. This Water Well Record was completed on (mo-day-year) 8/1/15. under the business name of D&R Pump Service, LLC. Signature												
under the business name of D&R Pump Service, LLC. Mail I 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 S	St., Suite 420, Topeka, Kansas	66612-1367. Mail one to	Water Well Ov	vner and retain one	for your records. Telepi	none 785-296	-5524.				
	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											