WATER WELL R	ECORD	Form V	WWC-5		ision of Water		W-11 TD					
Original Record	Correction		e in Well Use		urces App. No.	1: 37 1	Well ID					
1 LOCATION OF WATER WELL: Fraction					Section Number Township Number Range Number							
Country M 40/1/2 /4 SW/4 20 T 8 8 R/D LE W												
2 WELL ONATED Land Object First Miles of Street or Rural Address where well is located (if unknown, distance and												
Business:	ast Hank. O'	111541	11/1/2014/21	direction from	nearest town or in	tersection): If at owner	r's address, check here: 🛭					
Address: 701 Gambrinus												
Address:												
City: Troton		State: KS	zip: 67485									
3 LOCATE WELL	4 DEDTE			60 A	E Tational	39°20'30.8	//// (decimal degree					
WITH "X" IN	4 DEPTH OF COMPLETED WELL: 60 ft. 5 Latitude: 39°20'30.8" (decimal degree Depth(s) Groundwater Encountered: 1) 35 ft. Longitude: 77°28'11.5" (decimal degree											
SECTION BOX:	Depth(s) Groundwater Encountered: 1)						(decimal degree					
N	2)											
 	WELL'S STATIC WATER LEVEL:											
						(unit make/model:						
NW NE		above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map						
		Pump test data: Well water was					aphic Map					
W . E	atter	after hours pumping gpm Online Mapper										
W χ E E E E E E E E		Well water was ft.										
		after hours pumping gpm 6 Elevation: 6 Elevation: ft. S Ground Level										
	Estimated	Estimated Yield: 2gpm Bore Hole Diameter in. to60 ft. and				Source: Land Survey GPS Topographic Map						
S mile	Bore Hole	Diameter	in. toا.	n. and	<u>boures</u> .	Other						
7 WELL WATER TO BE USED AS:												
1			tor Complete and III		10 17 081	Sield Water Simply: le	9969					
1. Domestic:			ater Supply: well ID		10. [_] OII I	le: well ID 7	Dry Plussed					
☐ Household 6. ☐ Dewatering: how many wells?					☐ Cased ☐ Uncased ☐ Geotechnical							
Livestock							30010011111011					
2. Irrigation							al Vertical					
3. ☐ Feedlot			e Soil Vapor		h) One	Loop Surface Di	scharge Inj. of Water					
4. Industrial		Recovery		LAUGUTON								
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 ☐ Other												
Casing diameter												
Casing neight above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel Fiberglass M PVC Other (Specify)												
	nless Steel					(Specify)						
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:												
☐ Continuous Slot	Mill Slot	<u>U</u> G	auze Wrapped To	orch Cut 🔲 D	rilled Holes [Other (Specify)	•••••					
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole) SCREEN-PERFORATED INTERVALS: From												
SCREEN-PERFORAL	ED INTERV	ALS: From	1	ft., From .	ft. to .	ft., From	ft. to ft.					
GRAVEL PACK INTERVALS: From 20. ft. to 40. ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From Q. ft. to 20 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												
Matertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)												
Direction from well?												
10 FROM TO	······	TTEOLO	Distance from w									
	<u> </u>	LITHOLOG	aic LUG	FROM	TO L	THO. LOG (cont.) or	PLUGGING INTERVAL					
	Clay											
10 20	CIAY											
20 30	Clay											
30 40	Grave)	+ San	d									
40 50	Gravel	_Line	stonze									
50 60	Grey	shale										
	· /			Notes:			· · · · · · · · · · · · · · · · · · ·					
				7								
11 CONTRACTORS	ODIANDA	OWNED	CEDTIFICATION	I This	r well was	constructed [] ross	netmeted or Maluere					
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)												
Kansas Water Well Contractor's License No. (25) This Water Well Record was completed on (mo_day_veer)												
under the business name of Schice District Signature Signature												
under the business name	201 6- 4	10	12 11:1		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,							
Mail 1 white conv ale	ong with a fee of	\$5.00 for each	h constructed well to: Kar	sas Denartment	of Health and Fn	vironment, Bureau of Wa	iter, GWTS Section,					
Mail 1 white copy alo	ing with a fee of	\$5.00 for eac	th constructed well to: Kar 66612-1367. Mail one to	asas Department	of Health and En	vironment, Bureau of Wa	ater, GW15 Section,					