WA	TER	WELL	RECORD	Form WWC-5	5 E	ivision of	Water Rese	ources App. No).			
1 L		TION OF erman	WATER WELL:	Fraction 4 NE 4 NE 4	NE ¼	2	28	Township N	S	R 39	lumber □E ⊠W	
				nown, distance & direction	n	Global P	ositioning	System (GPS	S) infor	mation:		
from r	nearest	town or int	ersection: If at owner	s address, check here \square .		Latitud	e: N 39 20	0.149 1 40.237	- -	(in decima	degrees)	
					ŀ	Longitu	ide: W 10	1 40.237		(in decima	degrees)	
2 11/	A TIPE	DWELL	OWNED Dead C			Elevatio	on: 3702	A FINAD 9	2 N	NAD 27		
	WATER WELL OWNER Brad Cowan RR#, St. Address, Box # 6380 Rd 22						Datum: ⊠ WGS 84, □ NAD 83, □ NAD 27 Collection Method:					
	City, State, ZIP Code Goodland, KS 67735						GPS unit (Make/Model:					
	.гу, оп	iic, Zii C	ouc Goodiai	iu, 135 07755		☐ Diei	ital Man/Phot	to, Topograph	ic Man.	☐ Land Sur	rvev	
								m, 🗆 3-5 m, 🗖				
3 L(OCAT	E WELI	,									
		AN "X" I		COMPLETED WELL	290			ft.				
1		ON BOX:	Denth(s) Ground	water Encountered (1)			ft (2)		ft. (3)		ft.	
51	JC 11.	N	WELL'S STATI	COMPLETED WELL lwater Encountered (1) C WATER LEVEL	194	ft below l	and surface	measured on n	no/dav/	vr		
г	-:	1 : %	l WEEL S STATE	np test data: Well water	# 11/0C	it. ociow i	ft ofter	hour	re numr	y'	anm	
		^										
	– NW -	+- NE	EST. TIELD	gpm: Well water	r was	1		1	ւծ բանոր ⊟ւ⊷:օր	nig	gpm	
w L	WELL WATER TO BE USED AS: LI Public v						Geothe	rmai		::::::::::::::::::::::::::::::::::::::	- ala)	
1 1	☐ Domestic ☐ Feedlot Oil field water supp						by Dewatering Diner (Specify below)					
 	WELL WATER TO BE USED AS: □ Public water supply □ Geothermal □ Injection well □ Domestic □ Feedlot □ Oil field water supply □ Dewatering □ Other (Specify below) □ Irrigation □ Industrial □ Domestic-lawn & garden □ Monitoring well											
L	Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No											
		S	If yes, mo/o	day/yr sample was submitt	ted							
	1	mile	Water Well Disi	nfected? 🗵 Yes 🗆	No							
5 TY	YPE C	F CASINO	G USED: ☐ Steel	☑ PVC ☐ Othe	er							
CASI	NG JO	DINTS: [☑ Glued ☐ Clamp	oed	☐ Threa	ded						
Cas	ing dia	meter	4.5 in. to 250	ft., Diameter		in. to	ft.,	Diameter		in. to	ft.	
Cas	ing he	ight above	and surface	18 in., Weight	2.3	8	lbs./ft. Wa	all thickness or	gauge N	No	248	
CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ Threaded Casing diameter 4.5 in. to 250 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 18 in., Weight 2.38 lbs./ft. Wall thickness or gauge No248 TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)												
	Stee	[☐ Stainless Steel ☐ Galvanized Steel	XI PVC	U Oth	er (Specify	y)					
	Bras		ATION OPENINGS A		oie)							
			t ☐ Mill slot	☐ Gauze wrapped	☐ Torch (cut	☐ Drilled b	noles 🗆 No	one (one	en hole)		
			r	☐ Wire wrapped	Saw cu	1t	Other (si	noles	one (op	on note;		
			ED INTERVALS:	From 250	ft. to	290	ft., Fro	om	ft.	to	ft.	
				From	ft. to		ft., Fro	om	ft.	to	ft.	
	GRA	VEL PACE	K INTERVALS:	From 20	ft. to	290	ft., Fro	o m	ft.	to	ft.	
				From	ft. to		ft., Fro	om	ft.	to	ft.	
6 G	ROUI	MATERI	AL:	nt Cement grout	⊠ Be	ntonite	☐ Other					
Grout	Interv	als Fr	om 0 ft. to	nt Cement grout 20 ft. From	ft	. to	ft.	From		ft. to	ft.	
wnat	is the i	nearest sour	ce of possible contam	ination:								
		ic tank	☐ Lateral lir		Livesto			icide storage		Other (speci	fy below)	
		er lines	☐ Cesspool er lines ☐ Seepage p	☐ Sewage lagoon oit ☐ Feedvard	☐ Fuel st			doned water we ell/gas well	n Nor	20		
		from well		nt 🗀 reedyard		e from we	11					
								100(TEDVALC	
FRC		TO	Surface	LOGIC LOG	FRON 173	4 TO 201		o. LOG (cont.) c c med sand w				
$\frac{0}{2}$		24	Loess		201	211		ted sand	/ciay c	x canche s	<u>su ns</u>	
24		56	Clay w/caliche str	İze	211	290		med sand w	/calich	e strks		
56		73		& small gravel w/clay	290	300			/Canci	ic sti ks		
	,	- 75	& caliche strks	ce sman graver w/clay	270	500	Diack	Situic				
73	3	91	Clay & caliche w/s	sand strks								
91		103	Cemented sand	. 40.44.0								
10		133	Clay & caliche w/s	sand strks								
13		156		w/clay & caliche strks								
15		173	Clay & caliche w/s									
				ER'S CERTIFICATION	UN: This							
under my jurisdiction and was completed on (mo/day/year) 5/4/12 And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 . This Water Well Record was completed on (mo/day/year), 6-5-12												
Kansa	s Wate	er well Con	itractor's License No.	554 . This	water We	ii Kecord	was comple	ted on (mo/day	year	0-2-/	<u> </u>	
			of Woofter Pum		by (sign							
INSTRUCTIONS: Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) & Kansas Department of Health and Environment, Bureau Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and reta												
one for	Jeoroj T vour r	ecords. Incli	ide fee of \$5.00 for each	constructed well. Visit us at	http://www	.kdheks.go	v/waterwell/i	index.html.	LIER W	LLL O WILL	J. una ividili	