| WATER WEI | | Form W | WC-5 | Division of Water Resources App. No. |
|--|--|--------------------|---|---|
| | OF WATER WELL: | Fraction | | Section Number Township No. Range Number |
| County: Potawatomie | | | | |
| Street/Rural Address of Well Location; if unknown, distance & direction from possest town or interception. If at any part address a batch to the state of the st | | | | |
| from nearest town or intersection: If at owner's address, check here . | | | Latitude: (in decimal degrees) | |
| 5 miles East of Manhattan, KS | | | | Longitude: (in decimal degrees) Elevation: |
| | | | | Datum: WGS 84, NAD 83, NAD 27 |
| 2 WATER WELL OWNER: Walters Morgan Construction | | | | Collection Method: |
| RR#, Street Address, Box #: 2616 Tuttle Creek Blvd. | | | GPS unit (Make/Model: | |
| City, State, ZIP Code : Manhattan, KS 66502 | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | |
| Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m | | | | |
| WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 55 ft. | | | | |
| SECTION BO | X: Depth(s) Ground | lwater Encountered | (1) | ft. (2) ft. (3) ft. |
| WELL'S STATIC WATER LEVEL16ft. below land surface measured on mo/day/yr9/1.3/10 | | | | |
| Pump test data: Well water wasft. after hours pumpingg | | | | |
| -NW - NE - EST. YIELD.3500gpm. Well water wasft. after hours pumping | | | | |
| W E Bore Hole Diameter 30in. to55ft., andin. toft. | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | |
| SW SE - Domestic Feedlot Oil field water supply X Dewatering Other (Specify below) | | | | |
| ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes X No If yes mo/day/yr sample was submitted | | | | |
| S If yes, mo/day/yr sample was submitted Water well disinfected? X Yes No | | | | |
| | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | |
| CASING JOINTS: Glued Clamped Welded Threaded | | | | |
| Casing diameter16 | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | |
| Steel Stainless Steel XX PVC Other (Specify) | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | |
| Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole) | | | | |
| ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify) | | | | |
| From ft to ft From ft to ft From ft to | | | | |
| From | | | | |
| From ft. to ft., From ft. to ft. | | | | |
| 6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout 🖾 Bentonite ☐ Other | | | | |
| Grout Intervals: From0. ft. to20. ft., From ft. to ft. to ft. to ft. | | | | |
| What is the nearest source of possible contamination: | | | | |
| ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well | | | | |
| Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well | | | | |
| Direction from | n well | | | e from well |
| FROM TO | LITHOLOG | | FROM | TO LITHO. LOG (cont.) or PLUGGING INTERVALS |
| 0 2 | Topsoil | | | |
| 2 15 | Gray Clay | | | |
| 15 35 | Fine to medium s | and | | |
| 35 55 | Coasrse Sandw/bi | | | |
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| | and the second s | | | |
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| 7 CONTRACTO | Dic OD I ANDOUNED | ic constitue : man | NI ON ' | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 9/13/10 and this record is true to the best of my knowledge and belief. | | | | |
| Kansas Water Well Contractor's License No1.38 This Water Well Record was completed on my knowledge and belief. | | | | |
| under the business name of Peterson Irrigation, Inc. by (signature) | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies | | | | |
| (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St. Suite 420 Topeka Kansas 66612-1367 | | | | |
| Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html. | | | | |
| KSA 82a-1212 | | | | |
| 180/1 024-1212 | | | | |