

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Shawnee</u>	Fraction <u>NE 1/4 NE 1/4 NE 1/4</u>	Section Number <u>10</u>	Township Number T <u>12</u> S	Range Number R <u>17</u> E
Distance and direction from nearest town or city street address of well if located within city? <u>1319 S.E. Woodring Rt. Tecumseh</u>		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: <u>Wayne Dirks</u> RR#, St. Address, Box # : <u>1319 S.E. Woodring Rd</u> City, State, ZIP Code : <u>Tecumseh, Ks. 66542</u>				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr><td> </td><td> </td><td> </td></tr> <tr><td>-- NW --</td><td> </td><td>-- NE --</td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td>-- SW --</td><td> </td><td>-- SE --</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> S				-- NW --		-- NE --				-- SW --		-- SE --				4 DEPTH OF COMPLETED WELLS <u>180</u>ft. <u>3-180' Wells</u> <u>Plugged</u> Depth(s) Groundwater Encountered (1). <u>NONE</u> .. ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL <u>NONE</u> ... ft. below land surface measured on mo/day/yr..... Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield. <u>NONE</u> gpm: Well water was.....ft. after..... hours pumping..... gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering <u>2 Other (Specify below)</u> 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well <u>Close Loop Heat Pump</u> Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes No <u>X</u>
-- NW --		-- NE --														
-- SW --		-- SE --														

5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 2 PVC 4 ABS <u>3/4</u> Blank casing diameter..... in. to <u>1.80</u> ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft. Casing height above land surface..... <u>36</u> in., Weight <u>SDR 11</u> lbs./ft. Wall thickness or gauge No. <u>160 PSI</u>	5 Wrought Iron 8 Concrete tile 6 Asbestos-Cement 9 Other (specify below) 7 Fiberglass	CASING JOINTS: Glued..... Clamped..... Welded <u>Fusion</u> Threaded.....
TYPE OF SCREEN OR PERFORATION MATERIAL: <u>NONE</u> 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE: <u>NONE</u> 1 Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)		
SCREEN-PERFORATED INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft. From..... ft. to..... ft., From..... ft. to..... ft.		
GRAVEL PACK INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft. From..... ft. to..... ft., From..... ft. to..... ft.		

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3</u> Bentonite 4 Other	Grout Intervals: From <u>180</u> ft. to <u>3</u> ft., From..... ft. to..... ft., From..... ft. to..... ft.
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well	
Direction from well? How many feet?	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	8	Soil & Clay			
8	20	lump			
20	25	Shale			
25	38	sandstone	180	3	3-180' Bore Plugged
38	59	Shale			
59	63	sandstone			
63	72	Shale			
72	88	lime			
88	91	Shale			
91	94	lime			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or <u>3</u> plugged under my jurisdiction and was completed on (mo/day/year) <u>7-3-08</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>561</u> This Water Well Record was completed on (mo/day/year) <u>7-7-08</u> under the business name of <u>Evans Energy Dev. Inc.</u> by (signature) <u>[Signature]</u>	
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INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies 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 to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.

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Distance and direction from nearest town or city street address of well if located within city?
1319 S.E. Woodring Rt. Tecumseh

2 WATER WELL OWNER: Wayne Dirks
RR#, St. Address, Box # : 1319 S.E. Woodring Rd
City, State, ZIP Code : Tecumseh, Ks. 66542

Global Positioning Systems (decimal degrees, min. of 4 digits)
Latitude: _____
Longitude: _____
Elevation: _____
Datum: _____
Data Collection Method: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

-- NW --	-- NE --		
			X
-- SW --	-- SE --		

S

4 DEPTH OF COMPLETED WELLS.....180..... ft. 3-180' Wells
plugged

Depth(s) Groundwater Encountered (1). NONE.. ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL NONE... ft. below land surface measured on mo/day/yr.....
Pump test data: Well water was.....ft. after..... hours pumping..... gpm
Est. Yield. NONE gpm: Well water was.....ft. after..... hours pumping..... gpm
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well
Close Loop Heat Pump

Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes No X.....

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued..... Clamped.....
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded <u>Fusion</u>
		7 Fiberglass		Threaded.....

Blank casing diameter..... in. to 1.80..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
Casing height above land surface..... 36..... in., Weight SDR 11..... lbs./ft. Wall thickness or gauge No. 160 PSI.....

TYPE OF SCREEN OR PERFORATION MATERIAL: NONE

1 Steel	3 Stainless Steel	5 Fiberglass	7 PVC	9 ABS	11 Other (Specify)
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: NONE

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.

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From..... ft. to..... ft., From..... ft. to..... ft.

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What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	16 Other (specify below)
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Direction from well? How many feet?

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