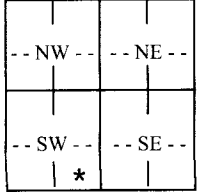


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Dickinson</u>	Fraction <u>SE 1/4 SE 1/4 SW 1/4</u>	Section Number <u>5</u>	Township Number <u>T 14 S</u>	Range Number <u>R 3 E**</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Located at 1441-1800 Ave Enterprise, Ks</u>		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: <u>Gene Whittle</u> RR#, St. Address, Box # : <u>1548-2150 Ave</u> City, State, ZIP Code : <u>Enterprise, Ks 67441</u>				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	4 DEPTH OF COMPLETED WELL <u>85</u> ft. Depth(s) Groundwater Encountered (1) <u>26</u> ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <u>23</u> ft. below land surface measured on mo/day/yr. <u>8/30/09</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>14</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 <u>1 Domestic</u> 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well _____ Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>*</u> ; If yes, mo/day/yr Sample was submitted. _____ Water well disinfected? Yes <u>*</u> No _____
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5 TYPE OF CASING USED:

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

Blank casing diameter 5 in. to 85 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface 14 in., Weight 200 lbs./ft. Wall thickness or gauge No. 250

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<u>7 PVC</u>	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:

1 Continuous slot	<u>3 Mill slot</u>	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 25 ft. to 85 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 23 ft. to 85 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From 1 ft. to 23 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	<u>4 Lateral lines</u>	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? EAST APPROX How many feet? 185

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS*
0	6	TOP SOIL DARK COLOR	28	39	GRAY SHALE
6	2	SHALE	39	42	TAN LIMESTONE
2	3	LIMESTONE LITE COLOR	42	48	LITE COLOR SHALE
3	7	LITE COLOR CLAY & SHALE	48	58	BROWN CLAY & SHALE
7	8	LITE COLOR LIMESTONE	58	63	GRAY SHALE & CLAY
8	19	TAN CLAY	63	76	LITE COLOR LIMESTONE
19	23	LIMESTONE	76	80	GRAY LIMESTONE
23	25	LITE COLOR SHALE	80	85	GRAY SHALE
25	26	LITE COLOR LIMESTONE			
26	28	LITE COLOR SHALE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8/30/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 397 This Water Well Record was completed on (mo/day/year) 8/3/09 under the business name of CENTRAL KANSAS DRILLING by (signature) David D. Martin

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.kdheks.gov/waterwell/index.html>.