WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

I LOCATION OF WATER WELL: County: Morris	Fraction: NW ¼ NE ¼ NW ¼	Section Number: 35	Township Number: T 14 S	Range Number: R 6 (E) W

Distance and direction from nearest town or city street address of well if located within city?
NE corner of Adolf & MacKenzie streets within the city limits of White City

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

2 WATER WELL OWNER: Dwight Fuel Service
RR#, St. Address, Box #: Adolph & McKenzie
City, State, ZIP Code: White City, KS 66872

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

N / W / E / S — X in NW

4 DEPTH OF COMPLETED WELL 106 ft.

Depth(s) Groundwater Encountered (1) ..... ft. (2) ..... ft. (3) ..... ft.
WELL'S STATIC WATER LEVEL 84 ft. below land surface measured on mo/day/yr 6/4/08
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm
Est. Yield ..... 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 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 X If yes, mo/day/yrs
Sample was submitted ..... Water well disinfected? Yes ..... No X

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....
(2) PVC 4 ABS 7 Fiberglass ..... Threaded yes

Blank casing diameter 1 in. to 98 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 3 ft in., Weight SCH 40 lbs./ft. Wall thickness or guage No. .....

TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass (7) PVC 9 ABS 11 Other (Specify) .....
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
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 105 ft. to 95 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 105 ft. to 93 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 93 ft. to 0 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	15	Fill, soil, limestone pieces clay, sand	72	82	Limestone - tan & gray
15	17	Limestone, tan	82	83	Shale, gray
17	20	Limestone, greenish tan	83	106	Limestone - light brown gray & yellow pieces
20	28	Shale, tan, dusty			
28	38	Limestone, tan			
38	41	Clay, gray, wet-gray water, hi plast			
41	49	Shale, greenish brown hi plast			OE-1
49	60	Reddish Brown			
60	65	Limestone, tan			
65	72	Shale, brown, occ. limestone layers			

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) 6/4/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 7/7/08 under the business name of Pratt Well Service, Inc. by (signature) Steven Eddy

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, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612- 1 367. Telephone 785-296-5522. Send one to WATER WELL 0WNER 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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