

WATER WELL RECORD

Form WWC-5

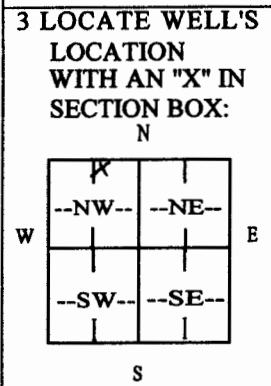
Division of Water Resources; App. No.

LOCATION OF WATER WELL: County: Morris	Fraction NW $\frac{1}{4}$ NE $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number 35	Township Number T 14 S	Range Number R 6 E/W
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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



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 6/5/08
 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/yr
 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 gauge 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 Steel 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 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 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	84	106	Limestone gray, yellow, tan
15	20	Limestone, tan			
20	28	Shale, tan			
28	38	Limestone, tan			
38	41	Clay, gray			
41	61	Shale, greenish brown			
61	65	Limestone tan			OE-4
65	72	Shale brown			
72	82	Limestone tan & gray			
82	84	Shale - gray			

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) 6/5/08 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) *[Signature]*

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 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>.