WATER WELL RECORD Form WWC-5 Division of Water Resources: App. No.									
		WATER WELL: ranklin		V ¼ NW	Sec	tion Num	nber	Township Number	Range Number
County: Franklin NW 1/4 NW 1/4 NW 1/4 36 T 16 S R 19 E Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)									
located within city? 104 E Logan St, Ottawa, KS 66067 Latitude: NA									
2 WAT	OWNER: KDHI	(Roytor Oil)		Longitude: NA Elevation: TOC: 891.24; RIM: 891.54					
2 WATER WELL OWNER: KDHE (Baxter Oil) RR# St. Address. Box # : 1000 SW Jackson						Datum: NAVD 88			
RR#, St. Address, Box # : 1000 SW Jackson City, State, ZIP Code : Topeka, KS, 66612						Data Collection Method: legal survey			
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 20 ft.									
	ATON					1W3			
WITH	I AN "X" I	N Depth(s) Groun	ndwater Encount	ered l				ft. 3	ft.
SECT	ION BOX	WELL'S STA	ΓΙC WATER LE	EVEL 5.4	15 ft. be	low land	l surfac	e measured on mo/	ft. day/yr 1/27/10
	N	Pumi	n test data: Wel	ll water was		ft. af	fter	hours numr	ing gnm
X		Est. Yield	gpm: Wel	ll water was		ft. af	fter	hours pump	ping gpm
	v— NE —	WELL WATE	R TO BE USED	AS: 5 Pub	lic water	supply	8 Air	conditioning 11 I	njection well
1 1 1		_ 1 Domestic 3	Feed lot 6 Oi	il field wate	r supply	9	Dewa	tering 12 Otl	ner (Specify below)
W		2 Irrigation 4	Industrial 7 Do	omestic (lav	vn & garo	ien) (10))Monit	oring well	(1)
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs									
	S	Sample was su	bmitted			Wa	ater We	ell Disinfected? Yes	s No X
5 TYPE	OF CASI	NG USED: 5 3 RMP (SR) 6	Wrought Iron	8 (oncrete t	ile	CASI	NG JOINTS: Glued	Clamped
1 Ste	eel	3 RMP (SR) 6	Asbestos-Ceme	nt 9 (ther (spe	cify below	w)	Weld	ed
(2) PV	/C	4 ABS 7	Fiberglass	, .	outer (spe	on, out	.,	Threa	ded Y
Blank cas	ing diamete	r 2 in to	5 ft. Di	ia	in t	0	ff 1	Dia in	to A
2) PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 5 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.30 ft Weight lbs/ft Wall thickness or gauge No.									
Casing height below land surface 0.30 ft., Weight 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)									
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 Gauze 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 5 ft. to 20 ft. From ft. to ft.									
SCILLIA	-i Eld Old	TED INTERVALS	From	1t.	to	f	ft. From	m ft :	10
GR	AVEI DA	CK INTERVALS:	From	^{11.}	to	¹	A Eros	m — — — — — — — — — — — — — — — — — — —	io
l Gr	MVLLIA	ok in the Als.	From	A	to	£0	ft From	m ft	to
From ft. to ft. From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-2ft Grout Intervals From 2 ft. to 3 ft. From ft. to ft. From ft. to ft.									
Grout Intervals From 2 ft. to 3 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 2 Sewer lines 5 Cess pool 8 Sewage lagoon (1) Fuel storage 14 Abandoned water well below)									
2 Sewer lines 5 Cess pool 8 Sewage lagoon (1) Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well									
Direction from well? SE How many feet? ~40 ft									
			OLOGIC LOC					DI LICCINIC INTE	CDVAIC
FROM	TO 4		OLOGIC LOG		FROM	TO		PLUGGING INT	ERVALS
		Grass, topsoil; Brown : sand and red brick, mo		a, some					
4	9	Gray brown silty clay,							
9	14	Gray brown grading to		w plasticity					
14	20	Brown silty clay, low p	asticity						
					-				
<u> </u>						F	luchma	ount waiver from l	ROW
						F	.4341111	Juli Walver (10HI)	JO 11
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) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 3/3/10									
							npleted		3/3/10
		of Larsen & Asso			(signature)			for foren	·
INSTRUCTIONS: Please fill in blanks 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, Toneka Kansas 66612-1367, Telephone 785-296-5522, Send one to WATER WELL, OWNER and retain one for									
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.									