WATER WELL RECORD — Form WWC-5

Division of Water Resources App. No. _____

1 LOCATION OF WATER WELL: County: Miami | Fraction: ¼ SW ¼ SE ¼ SE ¼ | Section Number: 14 | Township No. T 17 S | Range Number R 24 ☒E ☐W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒

Global Positioning System (GPS) information:
Latitude: ..... (in decimal degrees)
Longitude: ..... (in decimal degrees)
Elevation: .....
Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27
Collection Method:
☐ GPS unit (Make/Model: .....)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: Adam + Megan Call
RR#, Street Address, Box #: 11564 W. 311th
City, State, ZIP Code: Paola ~~Louisburg~~, KS 66071 ~~66067~~

3 LOCATE WELL WITH AN "X" IN SECTION BOX:

N / W / E / S — NW, NE, SW, SE (X in SE)
|---------1 mile---------|

4 DEPTH OF COMPLETED WELL ..... 200 ..... ft. 4-200' Bores
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 ..... gpm. Well water was ..... ft. after ..... hours pumping ..... gpm
Bore Hole Diameter 6 in. to 200 ft., and ..... in. to ..... ft.
WELL WATER TO BE USED AS: ☐ Public water supply ☒ Geothermal ☐ Injection well
☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below)
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well closed loop
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No
If yes, mo/day/yr sample was submitted .....
Water well disinfected? ☐ Yes ☒ No

5 TYPE OF CASING USED: ☐ Steel ☐ PVC ☒ Other HD Polyethylene
CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ Threaded
Casing diameter 3¼ in. to 200 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height ~~above~~ below land surface 36 in., Weight SDR 11 lbs./ft., Wall thickness or gauge No. 160 PSI
TYPE OF SCREEN OR PERFORATION MATERIAL: NA
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) .....
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: NA
☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)
☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ 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: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....
Grout Intervals: From 200 ft. to 3 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
What is the nearest source of possible contamination:
☒ Septic tank ☒ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)
☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well .....
Direction from well NW ..... Distance from well 100' .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	5	Soil + clay			
5	20	lime			
20	38	Shale			4-200' Bores Plugged
38	67	lime			
67	75	Shale	200	3	High Solid Bentonite
75	84	lime			
84	127	Shale			
127	142	lime			
142	156	Shale			
156	167	lime			
		167-169 Shale			
		169-175 lime			
		175-182 Sand			
		182-186 Shale			
		186-200 lime			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) 6-17-10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 561 This Water Well Record was completed on (mo/day/year) 6-21-10 under the business name of Evans Energy Dev Inc by (signature) _____

INSTRUCTIONS: Use typewriter or ball point pen. *PLEASE PRESS FIRMLY* and *PRINT* clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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 copy to WATER WELL OWNER and retain one for your records. Include fee of $5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html.

KSA 82a-1212