| WATER WELL RECORD | | | Form W | WC-5 | | r Resources App. N | · | |
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| 1 LOCATION OF WATER WELL: | | | Fraction | | Section Number | | Range Number | |
| County: Marion | | | 1/4 SW 1/4 NW 1/4 SW 1/4 | | 8 | T18 S | | |
| | | lress of Well Location; i | | Global Positioning System (GPS) information: | | | | |
| from nearest town or intersection: If at owner's address, check here | | | | | Latitude: (in decimal degrees) | | | |
| ı mil | 1 mile North & 1 mile West of Durham, KS | | | | | Longitude: (in decimal degrees) Elevation: | | |
| | | | | | Datum: WGS 84, NAD 83, NAD 27 | | | |
| 2 WATER WELL OWNER: Jason Wiel | | | | | Collection Method: | | i de la companya de | |
| | | | GPS unit (Make/Model: GPS unit (Make/Model: Digital Map/Photo, Topoge | | | | | |
| City, | State, ZIP | Code : Durha | m, KS 67438 | | Est. Accuracy: < | | | |
| 3 LOCA | TE WELL | | | | | 5 m, [] 5-5 m, [] | J-13 III, / 13 III | |
| WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 59 ft. | | | | | | | | |
| SECT | SECTION BOX: Depth(s) Groundwater Encountered (1) | | | | | | | |
| N WELL'S STATIC WATER LEVEL30ft. below land surface measured on mo/day/yr9/1.0/12 Pump test data: Well water wasft. afterhours pumping | | | | | | | | |
| | | | | | | | | |
| | | |)gpm. Well water wasft. after hours pumping gpm ter9in. toft. | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | |
| Demostic Decodlet Doil field water gumbly Develoring Mother (Specify below | | | | | | | | |
| SW - SE - | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes X No | | | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | | | |
| Water well disinfected? X Yes No | | | | | | | | |
| 5 TYPE OF CASING USED: Steel X PVC Other | | | | | | | | |
| CASING JOINTS: X Glued Clamped Welded Threaded | | | | | | | | |
| Casing diameter 5 in. to 29 ft., Diameter in. to ft., Diameter in. to ft. | | | | | | | | |
| Casing height above land surface | | | | | | | | |
| Steel Stainless Steel PVC Other (Specify) | | | | | | | | |
| Brass Galvanized Steel [] None used (open note) | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | |
| ☐ Continuous slot X 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 29 ft. to 59 ft., From ft. to ft. | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | |
| From | | | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | |
| Grout In | | | | a | II. 10 II., | From | It. 10It. | |
| 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 | | | | | | | | |
| | tion from v | well Fast LITHOLOG | | FROM | | | JGGING INTERVALS | |
| FROM | ******* | | | FRUM | 10 LITHU. L | og (com.) <u>or</u> PLC | JOUING INTERVALS | |
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| 21 | 21 (29 (| lay, tan lay, sandy tan | | | | | | |
| 29 | | Sand, fine to med | lium | | | | | |
| 39 | | Shale, gray w/sma | | | | | Maria Ministra Para Maria | |
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| | | | | | | www.www. | | |
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| 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) 9/10/12 and this record is true to the best of my knowledge and belief. | | | | | | | | |
| Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/year) . 9/11/1/12 | | | | | | | | |
| under the business name of Peterson Irrigation, Inc by (signature) | | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 785-296-5524. 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 | | | | | | | | |