

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

| | | | | |
|---|---|---|----------------------------------|---------------------------------------|
| 1 LOCATION OF WATER WELL: County: <u>LYON</u> Distance and direction from nearest town or city street address of well if located within city? <u>FROM OLPE: S.S WEST, 2 SOUTH, 3 WEST, 3 SOUTH, 1/4 WEST</u> | Fraction <u>NE 1/4 NE 1/4 NE 1/4</u> | Section Number <u>32</u> | Township Number T <u>21</u> S | Range Number R <u>10</u> <u>EW</u> |
| 2 WATER WELL OWNER: <u>HIGHLAND RANCH CO.</u> RR#, St. Address, Box # : <u>P.O BOX 763188</u> City, State, ZIP Code : <u>WEICHTA, KS 67278-3188</u> | | Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____ | | |

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

N

| | |
|----|----|
| | |
| NW | NE |
| | X |
| SW | SE |

S

4 DEPTH OF COMPLETED WELL 33 ft.

Depth(s) Groundwater Encountered (1) 15 ft. (2) _____ ft. (3) _____ ft.

WELL'S STATIC WATER LEVEL 10 ft. below land surface measured on mo/day/yr. 4/5/07

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield. 30 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

WELL WATER TO BE USED AS:

| | | | | |
|--|---------------------------------------|---|---|---|
| <input checked="" type="checkbox"/> Domestic | <input type="checkbox"/> 3 Feedlot | <input type="checkbox"/> 6 Oil field water supply | <input type="checkbox"/> 9 Dewatering | <input type="checkbox"/> 12 Other (Specify below) |
| <input type="checkbox"/> 2 Irrigation | <input type="checkbox"/> 4 Industrial | <input type="checkbox"/> 7 Domestic (lawn & garden) | <input type="checkbox"/> 10 Monitoring well | |

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:

| | | | |
|---|------------|-------------------|-------------------------|
| 1 Steel | 3 RMP (SR) | 6 Asbestos-Cement | 9 Other (specify below) |
| <input checked="" type="checkbox"/> PVC | 4 ABS | 7 Fiberglass | |

Blank casing diameter 5 in. to 13 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.

Casing height above land surface 36 in., Weight _____ lbs./ft. Wall thickness or gauge No. SRR 21

TYPE OF SCREEN OR PERFORATION MATERIAL:

| | | | | | |
|---------|--------------------|-----------------|---|--------------------|--------------------------|
| 1 Steel | 3 Stainless Steel | 5 Fiberglass | <input checked="" type="checkbox"/> 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 | <input checked="" type="checkbox"/> 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 13 ft. to 33 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 13 ft. to 33 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other _____

Grout Intervals: From 0 ft. to 13 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 | <input checked="" type="checkbox"/> 6 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 | <u>CREEK</u> |

Direction from well? EAST How many feet? 70

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|----------------|------|----|--------------------|
| 0 | 7 | CLAY | | | |
| 7 | 13 | GRAVEL | | | |
| 13 | 15 | CLAY, GRAY | | | |
| 15 | 18 | GRAVEL | | | |
| 18 | 22 | SHALE, GRAY | | | |
| 22 | 24 | LIMESTONE | | | |
| 24 | 33 | SHALE, GRAY | | | |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4/5/07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 760 This Water Well Record was completed on (mo/day/year) 4/26/07 under the business name of ASSOCIATED OILFIELD 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, 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.kdhe.state.ks.us/geo/waterwells>.