WATER V	WELL I	RECORD	Form	n WWC-	5 I	Division of W	Vater Reso	ources: App.	No.		
1 LOCATI	ON OF Y	WATER WELL: larion	Fraction SE	NE s	NW :	Section N	vumber	Township	Number I	Range Number	
Distance and	direction	from nearest town	or city stre	et address o	of well if	Global Po	sitionin	g System (d	ecimal degree:	s. min. of 4 digits)	
located within city? 114 E 5 <sup>th</sup> St., Florence, KS							Latitude: N 38.24233° Longitude: W 96.92500°				
2 WATER WELL OWNER: Shanklin Oil							Elevation: RIM: 1267.61; TOC: 1267.37				
RR#. St.	Address.	Box # : 400 Wi	tmarsum W	est Dr		Datum:	NAI	0.83	100.1207.5	<u> </u>	
		de : North N						Method: les	al survey		
3 LOCATI	E WELL	S 4 DEPTH OF	COMPLI	ETED WEI	LL	25		ft.			
LOCATO	ON	'S 4 DEPTH OF				MW1	0R				
WITH A		Depth(s) Group	ndwater End	countered I		2.2	ft. 2		ft. 3	ft	
SECTIO			ΓΙC WATE	R LEVEL	16.64	ft. below la	and surfa	ace measure	d on mo/day/	vr 1/6/10	
	V	Pumr	test data:	Well wate	r was	fi	t after	ho	urs numning	gpm	
		Est. Yield	gnm:	Well wate	r was	ft	after -	ho	urs numning	gpm	
L NIV X	NE -	WELL WATER	R TO BE U	SED AS	5 Public	water suppl	v 8 A	r conditioni	nσ II Iniec	rtion well	
1 1 :	NE										
W	U E Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10) Monitoring well										
	_ e	2 miguelon (	maastrar	Domesti	C (lawii c	z garacii)	(O).mon	mornig wen			
Svv	Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yrs										
<del> </del>	11 S	Sample was sul	nmitted	gicar sampi	c suomi	ica to Depa	Minent.	/all Disinfe	rtad? Vac	No. V	
			Jimucu				water w	- Distilled	ied. Tes	NO A	
5 TYPE O	F CASIN	G USED: 5	Wrought In	ron	8 Cond	rete tile	CAS	ING JOINT	S: Glued	Clamped	
1 Steel	3	RMP (SR) 6	Asbestos-(	Cement	9 Othe	r (specify b	elow)		Welded		
(2) PVC	4	ABS 7	Fiberglass						Threaded	X	
Blank casing	diameter	2 in. to	10	it., Dia		in. to	ft.	, Dia	in. to	ft.	
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in to 10 ft., Dia in to ft., Dia in to ft.  Casing height below land surface 0.24 ft., Weight Ibs./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)											
ICCDEEN OD DEDEOD ATION ODENINGS ADE:											
1 Continuous slot (3) Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)											
1 Continuous slot 5 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 10 ft. to 25 ft. From ft. to ft.											
SCREEN-PE	RFORA	TED INTERVALS:	From	10	ft. to	25	ft. Fr	om	ft. to	ft.	
			From		π. ιο		n. rr	om	II. IO	π.	
GRAV	EL PAC	K INTERVALS:	From	8	ft. to	25	ft. Fr	om	ft. to	ft.	
			From		ft. to		ft. Fr	om	ft. to	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 Concrete: 0-2 ft											
Grout Interva	ds Fro	om 2 ft to	8 ft	From		ft to	ft.	From	ft	to ft	
Grout Intervals From 2 ft. to 8 ft. From ft. to ft. From ft. to ft. From ft. to ft. What is the nearest source of possible contamination:											
1 Septic		4 Lateral lin	nes 7 Pit ni	·ivv	10 Live			ecticide Stor		Other (specify	
2 Sewer		5 Cess pool						andoned wa		below)	
1										<i>5616117</i>	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard Direction from well? Northwest  12 Fertilizer storage 15 Oil well/ gas well How many feet? ~300 ft											
			OCICIO	<u> </u>		•	T	DL LICC	NIC INITED	7.4.1.0	
FROM	TO 1	Grass, topsoil; dar	LOGIC LO		FRO	M TO		<u> </u>	ING INTERY	/ ALS	
0		some fine to coars					<del> </del>				
-		plasticity	c sand, mo	derate						· · · · · · · · · · · · · · · · · · ·	
ı		Dark brown silty c	lav with tr	ace sand.							
		moderate plasticit	y								
4		Silty clay, dark bro		ig to browi	1,		1				
		moderate plasticit	<u>y</u>								
							E'		- F. B.C.	X/	
							Flushn	nount waiv	er from BO	<i>N</i>	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged											
Lunder my jurisdiction and was completed on (mo/day/year) 1/5/10 and this record is True to the best of my knowledge and belief.											
		ractor's License No.							(year) 1/21		
		of Larsen & Asso				nature)					
INSTRUCTION	VS: Pleace	ill in blanks or circle th	e correct ansa	erc Send ton	three copie	s to Kansas D	epartment	of Health and	Environment, Bi	ireau 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.kdheks.gov/waterwell.											
your records. Fe	o or 35.00 i	or each constructed wel	i. v isit us at i	numa www.Ku	11CK3.20V/W	activen.					