AMW-3

| WATER WELL RECORD | Form W | WC-5 | D | ivision of Wate | r Resources App. N | 0. | |
|---|--|--------------|---|---|--------------------|----------------------|--|
| 1 LOCATION OF WATER WELL: | Fraction | | | ion Number | Township No. | Range Number | |
| County: Sumner | NE 1/4 NW 1/4 SE | 1/4 NE 1/ | 4 | 6 | T 30 S | R 2 ZE W | |
| Street/Rural Address of Well Location; if unknown, distance & direction | | | Glob | al Positioning | System (GPS) in | formation: | |
| from nearest town or intersection: If at owner's address, check here . | | | | Latitude: .37.47418(in decimal degrees) | | | |
| 105 W. Main St., Mulvane, KS | | | Long | Longitude: 97.24320 (in decimal degrees) | | | |
| , man ou, mand, no | | | | Elevation: 1235.20 | | | |
| 2 WATER WELL OWNER: Midwest Urethane Processing Co. | | | | | 4, 🗌 NAD 83, 🗍 | NAD 27 | |
| Third Tool of Children 1 to cooking Co. | | | | Collection Method: GPS unit (Make/Model:) | | | |
| G. G. Grand | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☑ Land Survey | | | | |
| City, State, ZIP Code : Tulsa, OK 74132 | | | | Est. Accuracy: \square <3 m, \square 3-5 m, \square 5-15 m, \square >15 m | | | |
| 3 LOCATE WELL | | | | | | | |
| WITH AN "X" IN 4 DEPTH OF | COMPLETED WEL | L 14.75 | | ft. | | | |
| SECTION BOX: Depth(s) Groun | Depth(s) Groundwater Encountered (1) . (2) | | | | | | |
| N WELL'S STAT | WELL'S STATIC WATER LEVEL. 8.18 | | | | | | |
| Pumj | Pump test data: Well water wasft. afterhours pumping | | | | | | |
| EST. YIELDgpm. Well water was | | | | | | | |
| W | | | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | |
| Other (Specify below) | | | | | | | |
| Irrigation Industrial Domestic-lawn & garden Monitoring well | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No | | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | | |
| water went districted: 1 163 kg 140 | | | | | | | |
| 5 TYPE OF CASING USED: Steel V PVC Other | | | | | | | |
| CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☑ Threaded | | | | | | | |
| Casing diameter .2 in. to .14.75 ft., Diameter in. to ft., Diameter in. to ft. | | | | | | | |
| Casing height above land surface5.0 in., Weight | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | |
| Steel Stainless Steel PVC Other (Specify) | | | | | | | |
| Brass Galvanized Steel None used (open hole) | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: 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 | | | | | | | |
| From ft., From ft. to ft. | | | | | | | |
| GRAVEL PACK INTERVALS: From . 3 | | | | | | | |
| From ft to ft From ft to ft | | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | |
| Grout Intervals: From 0.5 ft. to 3 ft., From ft. to ft., From ft. to ft., From ft. to ft. | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | |
| | | Livestock | | ☐ Insecticide | | er (specify below) | |
| ✓ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel stor | | | | | | | |
| ☐ Watertight sewer lines ☐ Seepage | pit Feedyard | ☐ Fertilizer | | Oil well/ga | s well | | |
| Direction from well West | | | | | | GGING INTERVALS | |
| FROM TO LITHOLOG | | FROM | TO | LITHU. LC | od (cont.) or PLO | GOING INTERVALS | |
| 0 1.2 Fill: sand, clay, gravel, | & aspnait | | | | | | |
| 1.2 4 Clayey silt, brown | | | | | | | |
| 4 12 Silty clay, red-brown to | | | | - | | | |
| 12 15 Sandy, silty clay, red-b | rown | | | | | | |
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| | | | | | | | |
| | DAG CEDWENIC LETO | NI TEL | 4 11 | | voted [] | voted on Dalvocad | |
| 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) .12/2/11 | | | | | | | |
| Kansas Water Well Contractor's License No. 416 This Water Well Record was completed on (mo/day/year) .1/23/12 | | | | | | | |
| under the business name of Terracon Consultants, Inc. by (signature) | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in Hanks 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 | | | C | heck: 🔽 Wh | iite Copy, 📙 Blu | ie Copy, 🔲 Pink Copy | |