

#1 Foltz

48302

WATER WELL RECORD

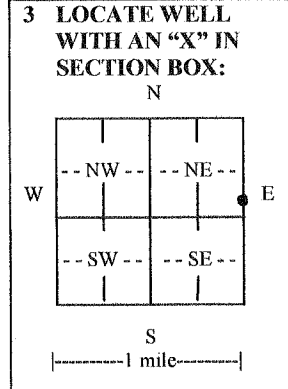
Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Sumner Fraction SE 1/4 SE 1/4 SE 1/4 NE 1/4 Section Number 7 Township No. T 31 S Range Number R 2 [X]E [ ]W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here [ ]. From Belle Plaine 2E 1 1/2 WSR Global Positioning System (GPS) information: Latitude: 37.37097 Longitude: 097.24044 Elevation: 1184 Datum: [ ] WGS 84, [ ] NAD 83, [X] NAD 27 Collection Method: [X] GPS unit (Make/Model: Garmin62s) [ ] Digital Map/Photo, [X] Topographic Map, [ ] Land Survey Est. Accuracy: [ ] <3 m, [X] 3-5 m, [ ] 5-15 m, [ ] >15 m

2 WATER WELL OWNER: Mark Lawless RR#, Street Address, Box #: PO Box 515 City, State, ZIP Code : Belle Plaine, Kansas 67013



3 LOCATE WELL WITH AN 'X' IN SECTION BOX: N W E S 1 mile 4 DEPTH OF COMPLETED WELL 40 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 12 ft. below land surface measured on mo/day/yr. 3/12/2014..... 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 20 in. to 40 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) [X] Irrigation [ ] Industrial [ ] Domestic-lawn & garden [ ] Monitoring well Was a chemical/bacteriological sample submitted to Department? [ ] Yes [X] No 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 Bolted Casing diameter 10 in. to 30 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface 24 in., Weight 160 lbs./ft., Wall thickness or gauge No. 413 TYPE OF SCREEN OR PERFORATION MATERIAL: [ ] Steel [X] Stainless Steel [ ] PVC [ ] Brass [ ] Galvanized Steel [ ] None used (open hole) [ ] Other (Specify) SCREEN OR PERFORATION OPENINGS ARE: [ ] Continuous slot [ ] Mill slot [ ] Gauze wrapped [ ] Torch cut [ ] Drilled holes [ ] None (open hole) [ ] Louvered shutter [ ] Key punched [X] Wire wrapped [ ] Saw cut [ ] Other (specify) SCREEN-PERFORATED INTERVALS: From 30 ft. to 40 ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From 40 ft. to 20 ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: [ ] Neat cement [ ] Cement grout [X] Bentonite [ ] Other Grout Intervals: From 20 ft. to 0 ft., From ..... ft. to ..... 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 [X] 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 None Direction from well ..... Distance from well .....

Table with 6 columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Rows include Top Soil, Clay, Sand & clay, Med. sand & gravel, Med. & small S & G, Small S & G white, Med. S & G white, Shale.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was [X] constructed, [ ] reconstructed, or [ ] plugged under my jurisdiction and was completed on (mo/day/year) 3/12/2014..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134..... This Water Well Record was completed on (mo/day/year) 3/17/2014..... under the business name of Rosencrantz-Bemis Ent. by (signature) [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 785-296-5524. 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.