

WATER WELL RECORD Form WWC-5

Original Record Correction Change in Well Use

Division of Water Resources App. No.

50,046

Well ID

E. WELL

1 LOCATION OF WATER WELL: County: Sumner	Fraction NE 1/4 SW 1/4 NW 1/4 NE 1/4	Section Number 2	Township Number T 33 S	Range Number R 2 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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2 WELL OWNER: Last Name: White First: Kevin Business Address: P.O. Box 966 City: Oxford State: Ks ZIP: 67119	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input type="checkbox"/> From Oxford-4 South 1/2 West SSR
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3 LOCATE WELL WITH "X" IN SECTION BOX:

N

W	<table border="1"> <tr> <td>---</td> <td>NW</td> <td>---</td> <td>NE</td> <td>---</td> </tr> <tr> <td>---</td> <td>SW</td> <td>---</td> <td>SE</td> <td>---</td> </tr> </table>	---	NW	---	NE	---	---	SW	---	SE	---	E
---	NW	---	NE	---								
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-----1 mile-----

4 DEPTH OF COMPLETED WELL: **51** ft.

Depth(s) Groundwater Encountered: 1) ft.
2) ft. 3) ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL: **26** ft.

below land surface, measured on (mo-day-yr).....
 above land surface, measured on (mo-day-yr).....

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

Estimated Yield: gpm

Bore Hole Diameter: in. to ft. and
..... in. to ft.

5 Latitude: **37.21477** (decimal degrees)
Longitude: **097.17414** (decimal degrees)
Horizontal Datum: WGS 84 NAD 83 NAD 27
Source for Latitude/Longitude:
 GPS (unit make/model: **Garmin 62S**.....)
(WAAS enabled? Yes No)
 Land Survey Topographic Map
 Online Mapper:

6 Elevation: **1146** ft. Ground Level TOC
Source: Land Survey GPS Topographic Map
 Other

7 WELL WATER TO BE USED AS:

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	2. <input checked="" type="checkbox"/> Irrigation	3. <input type="checkbox"/> Feedlot	4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID	6. <input type="checkbox"/> Dewatering: how many wells?	7. <input type="checkbox"/> Aquifer Recharge: well ID	8. <input type="checkbox"/> Monitoring: well ID	9. Environmental Remediation: well ID	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease	11. Test Hole: well ID	12. Geothermal: how many bores?	a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water	13. <input type="checkbox"/> Other (specify):
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Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:

Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded

Casing diameter **16** in. to **31** ft., Diameter in. to ft., Diameter in. to ft.
Casing height above land surface **24** in. Weight **SCH 40** lbs./ft. Wall thickness or gauge No. **500**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel Fiberglass PVC Other (Specify)

Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)

Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From **31** ft. to **51** ft., From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From **51** ft. to **18** ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From **18** ft. to **0** ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well

Other (Specify) **none**.....

Direction from well? Distance from well? ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	Top soil			
3	11	Brown clay			
11	16	Tan clay			
16	40	Small fine sand			
40	43	Green gray shale, small gravel 80/20			
43	51	Green shale			

Notes:

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) **3-21-2019**..... 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) **4-2-2019**..... under the business name of **Rosencrantz-Bemis Ent.** Signature *Jessica Dudson*