122 WATE	10954 DWF1	OB 1-11 LL RECORD	Form W	/WC-5	Division of Wate	r Resources App. No		
		OF WATER WELL:	Fraction		Section Number		Range Number	
Coun	ıty:	Cowley	1/4 NW 1/4 N\	W 1/4 NW 1/4	16		R 3 ⊠E □ W	
Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information: 37.099424								
from nearest town or intersection: If at owner's address, check here Approximately 3 miles west and 1 mile north of Arkansas City.					Latitude: 37.099424 (in decimal degrees) Longitude: -97.111297 (in decimal degrees)			
Approx	imately	3 miles west and 1 mile	north of Arkansas	Elevation: unknown				
A WATER WELL OWNER COMMON CO DIATO #4					Datum: WGS 84, [X] NAD 83, NAD 27			
2 WATER WELL OWNER: Sumner Co. RWD #4 RR#, Street Address, Box #: 4766 US 166					Collection Method: GPS unit (Make/Model: WAAS)			
City, State, ZIP Code : Arkansas City, KS 67005					☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
					Est. Accuracy: <	3 m, 🛛 3-5 m, 🔲	5-15 m, □>15 m	
3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL								
SECTION BOX: Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. (3) ft. (2) ft. below land surface measured on mo/day/yr 07/06/11								
*	Pump test data: Well water was not checked ft, after hours pumping gpm							
W -NW- -NE- EST. YIELD gpm. Well water was ft. after hours pumping gpm Bore Hole Diameter 5 in. to 41 ft., and in. to ft.								
W								
-SWSF Domestic Feedlot Oil field water supply Dewatering Other (Specify below)								
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well Observation Well								
Was a chemical/bacteriological sample submitted to Department? Yes No S If yes, mo/day/yr sample was submitted								
F1 mile Water well disinfected? \(\infty \text{Yes} \) No								
5 TYPE OF CASING USED: Steel PVC Other Other								
CASING JOINTS: M Glued Clamped Welded Threaded								
Casing diameter 2 in. to 25 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in., Weight .70 lbs./ft., Wall thickness or gauge No154								
Casing height above land surface 24 in., Weight .70 lbs./ft., Wall thickness or gauge No154								
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 25 ft. to 40 ft., From ft. to ft.								
SCREE	N-PERI	FORATED INTERVALS:	From 25	ft. to 4	ft., From	ft. to	ft.	
		EL PACK INTERVALS:	From	ft. to	ft., From	ft. to	o ft.	
	GRAV	EL PACK INTERVALS:	From20	ft. to	ft., From	ft. to	o ft.	
6 GROI	UT MA	FERIAL: Neat ceme	nt Cement grou	t Renton	ite Other	π. ις	o ft.	
		s: From ft. to	ft., Fron	n 0 f	t. to 20 ft.,	From	ft. to ft.	
What is the nearest source of possible contamination:								
	Septic ta Sewer lii		es Pit privy Sewage lagoon	Livestock p Fuel storage			r (specify below)	
		ht sewer lines Seepage pi		Fertilizer st			None Known	
_	tion from	n well		Distance f				
FROM	TO	LITHOLOGI	C LOG	FROM	TO LITHO. LC	G (cont.) <u>or</u> PLUC	GGING INTERVALS	
<u>0</u> 1	10	Topsoil Sand, fine						
10	15	Sand, fine - coarse		+				
15	40	Sand, gravel, fine - co	arse, clay streaks,	1				
		thin						
40	41	Shale, yellow, green, g	gray					
							*	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 07/06/11 and this record is true to the best of my knowledge and belief								
and my junious tion and was completed on (mortally search and my family								
Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 07/22/11 under the business name of Clarke Well & Equipment, Inc. by (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 conies								
(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://wwv	c /83-296 <u>v.kdheks.g</u>	-5522. Send one copy to WATE ov/waterwell/index.html.	K WELL OWNER and r	ciain one for yo	ui records. Include <u>tee</u>	UL \$5.00 for each con	istructed well. Visit us at	
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy								