19 9544 TW 10-10

WATER WELL RECORD

Form WWC-5 Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Nemaha | Fraction: 1/4 NE 1/4 NE 1/4 SE 1/4 | Section Number: 31 | Township No.: T 4 S | Range Number: R 11 ☒E ☐W

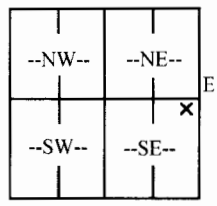
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐

Approximately 4 miles south and 2 1/2 miles east of Vermillion

Global Positioning System (GPS) information:
Latitude: 39.659372 (in decimal degrees)
Longitude: -96.220371 (in decimal degrees)
Elevation: unknown
Datum: ☐ WGS 84, ☒ NAD 83, ☐ NAD 27
Collection Method: ☒ GPS unit (Make/Model: WAAS) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☒ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: Pottawatomie County RWD #3
RR#, Street Address, Box #: 382 A Rd.
City, State, ZIP Code : Vermillion, KS 66544

3 LOCATE WELL WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 347 ft.
Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
WELL'S STATIC WATER LEVEL 138.47 ft. below land surface measured on mo/day/yr 2/23/10
Pump test data: Well water was not checked ft. after _____ hours pumping _____ gpm
EST. YIELD unknown gpm. Well water was _____ ft. after _____ hours pumping _____ gpm
Bore Hole Diameter 9 in. to 351 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)
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well Test Well
Was a chemical/bacteriological sample submitted to Department? ☒ Yes ☐ No
If yes, mo/day/yr sample was submitted 2/25/10
Water well disinfected? ☒ Yes ☐ No

5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other _____
CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded
Casing diameter 5 in. to 326 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface 24 in., Weight 2.36 lbs./ft., Wall thickness or gauge No. .214
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 326 ft. to 345 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 49 ft. to 90 ft., From 230 ft. to 351 ft.
From 110 ft. to 210 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____
Grout Intervals: From 0 ft. to 49 ft., From 90 ft. to 110 ft., From 210 ft. to 230 ft.
What is the nearest source of possible contamination:
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☒ Other (specify below)
☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well Old Test Well
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well
Direction from well South Distance from well 100'

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	4	Topsoil	165	175	Clay, gray, sandy and silty
4	9	Clay, gray, hard	175	185	Clay, gray, soft
9	18	Clay, tan, some caliche, hard	185	200	Clay, gray, firm, some clay, brown
18	67	Clay, tan, gray, hard	200	325	Clay, gray, silty, sandy
67	114	Clay, gray, hard	325	345	Sand and gravel, fine to coarse
114	121	Clay, gray, with gravel streaks	345	350	Clay, gray
121	137	Clay, brown and gray, silty, some sand	350	351	Limestone, hard
137	149	Clay, gray, soft			
149	155	Clay, gray with sand, medium			
155	165	Clay, gray, soft			

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) 2/22/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 3/1/10 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 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 Check: ☐ White Copy, ☐ Blue Copy, ☐ Pink Copy