| WATER WELL RECORD   |  |                                  | Form W                  | WC-5             | Div  | ision of Wate                | er Resources App. N          | o                                |  |
|---|--|----------------------------------|-------------------------|------------------|--|------------------------------|------------------------------|----------------------------------|--|
| 1 LOCATION OF WATER WELL:   |  |                                  | Fraction                |                  |  | n Number                     | Township No.                 | Range Number                     |  |
| County: CLAY  |  |                                  | 1/4 NW1/4 NH            |                  |  | <u> </u>                     | TBS                          | R 3 XE □W                        |  |
| Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here  |  |                                  |                         |                  | Global<br>Latitud  | Positioning<br>ie:3          | g System (GPS) ir<br>39 24 3 | nformation: (in decimal degrees) |  |
|   |  |                                  |                         |                  |  | ion <sup>.</sup>             |                              | (in decimal degrees)             |  |
| 2 WATER WELL OWNER: Keith Hoffman   |  |                                  |                         |                  |  | <u>Datum</u> :               |                              |                                  |  |
| RR#, Street Address, Box #: 1211 1314 57  |  |                                  |                         |                  | Collection Method:  GPS unit (Make/Model: COLUMPA ETERS) |                              |                              |                                  |  |
| at a grad t   |  |                                  |                         |                  | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey    |                              |                              |                                  |  |
| City, State, ZIP Code : Clay Center; KS 6743Z   |  |                                  |                         |                  |  | curacy: -                    | <3 m, ☐ 3-5 m, ☐             | 5-15 m, □ >15 m                  |  |
| 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL  |  |                                  |                         |                  |  |                              |                              |                                  |  |
| 1   | SECTION BOX: Depth(s) Groundwater Encountered (1)  |                                  |                         |                  |  |                              |                              |                                  |  |
|   | N WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr  |                                  |                         |                  |  |                              |                              |                                  |  |
|   | Pump test data: Well water wasft. afterhours pumping g   |                                  |                         |                  |  |                              |                              |                                  |  |
|   | W NW NE EST. YIELD. 30gpm. Well water was  |                                  |                         |                  |  |                              |                              |                                  |  |
| W   | WELL WATER TO BE USED AS: Public water supply Geothermal Injection well  |                                  |                         |                  |  |                              |                              |                                  |  |
| 50  | Domestic   Domestic   Domestic   Dewatering    Dewatering |                                  |                         |                  |  |                              |                              |                                  |  |
|   | Irrigation   |                                  |                         |                  |  |                              |                              |                                  |  |
|   | Was a chemical/bacteriological sample submitted to Department? Yes Yes You   |                                  |                         |                  |  |                              |                              |                                  |  |
|   | S If yes, mo/day/yr sample was submitted   |                                  |                         |                  |  |                              |                              |                                  |  |
| 5 TYPE OF CASING USED: Steel PVC OtherHOPE  |  |                                  |                         |                  |  |                              |                              |                                  |  |
| CASING JOINTS: Glued Clamped Welded Threaded  |  |                                  |                         |                  |  |                              |                              |                                  |  |
| CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to 200 ft., Diameter in. to ft. Casing height level land surface in., Weight lbs./ft., Wall thickness or gauge No. 5000            |  |                                  |                         |                  |  |                              |                              |                                  |  |
| Casing height were land surface   |  |                                  |                         |                  |  |                              |                              |                                  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  Steel Stainless Steel PVC Other (Specify)  |  |                                  |                         |                  |  |                              |                              |                                  |  |
| Brass Galvanised 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  |  |                                  |                         |                  |  |                              |                              |                                  |  |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.   |  |                                  |                         |                  |  |                              |                              |                                  |  |
| From  |  |                                  |                         |                  |  |                              |                              |                                  |  |
| Grout In  |  | From                             |                         | n f              | ft. to   | <del>î</del>                 | From                         | ft. toft.                        |  |
| What is   | the near   | est source of possible conta     |                         |                  |  | <b>,</b>                     |                              |                                  |  |
| ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well             |  |                                  |                         |                  |  |                              |                              |                                  |  |
| ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer s  |  |                                  |                         |                  | •  | ☐ Abandoned<br>☐ Oil well/ga |                              | USR                              |  |
|   | ction from   | n well                           |                         | Distance f       | _  |                              | 3                            |                                  |  |
| FROM  | ТО   | LITHOLÒG                         | IC LOG                  | FROM             | ТО   | LITHO. LO                    | OG (cont.) or PLU            | IGGING INTERVALS                 |  |
| 25  | 25<br>30   | CLAY                             |                         |                  |  |                              |                              |                                  |  |
| 30  | 60   | SUALE TOOL                       |                         |                  |  |                              |                              |                                  |  |
| 60  | 75   | LIMESTONE                        |                         |                  |  | 1-                           | ここと                          |                                  |  |
| 75  | 140  | SVALE GRAY                       |                         |                  |  | 3-                           | 185                          |                                  |  |
| 140   | 145  | LIMPSTUNE                        |                         |                  |  | 12-2                         | 200                          |                                  |  |
| 170   | 170  | SHITLE CONTE                     |                         | <u> </u>         |  |                              |                              |                                  |  |
| 175   | 200  | SHILK                            |                         |                  |  |                              |                              |                                  |  |
| 115   | 200  | gosthermal                       |                         |                  |  |                              |                              |                                  |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 27 constructed. The reconstructed of This placed   |  |                                  |                         |                  |  |                              |                              |                                  |  |
| under my jurisdiction and was completed on (mo/day/year)  |  |                                  |                         |                  |  |                              |                              |                                  |  |
| Kansas Water Well Contractor's License No. 7.60 This Water Well Record was completed on (mo/day/year) 4-7-7211 under the business name of ASSICIATED DEPLOYED. Deployed.                            |  |                                  |                         |                  |  |                              |                              |                                  |  |
| INSTRUC   | c ousine   | Use typewriter or ball point pen | PLEASE PRESS FIRML      | Y and PRINT cles | . Dy (S1)<br>arly. Pleas                                 | gnature) 🚄                   | s and check the correc       | t answers. Send three copies     |  |
| (white, blu   | ue, pink) t  | o Kansas Department of Health    | and Environment, Bureau | of Water, Geolog | gy Section   | , 1000 SW Jac                | ckson 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  |  |                                  |                         |                  |  |                              |                              |                                  |  |