

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>JACKSON</u>	Fraction <u>SE 1/4 SE 1/4 NE 1/4</u>	Section Number <u>18</u>	Township Number T <u>9</u> S	Range Number R <u>16</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>FROM HOYT 2 MILES EAST AND 1/2 MILE NORTH</u>		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		

2 WATER WELL OWNER: MR. HAROLD KELLER
RR#, St. Address, Box # : 12255 U RD.
City, State, ZIP Code : HOYT, KS 66440

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width:100%; text-align:center; border-collapse: collapse;"><tr><td>-- NW --</td><td>-- NE --</td></tr><tr><td> </td><td> </td></tr><tr><td>-- SW --</td><td>-- SE --</td></tr></table> S	-- NW --	-- NE --			-- SW --	-- SE --	4 DEPTH OF COMPLETED WELL <u>145</u> ft. Depth(s) Groundwater Encountered (1) <u>20</u> ft. (2) <u>48</u> ft. (3) _____ ft. WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr _____ Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>10</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering <u>12 Other (Specify below)</u> 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well <u>GEO THERMAL</u> Was a chemical/bacteriological sample submitted to Department? Yes No <u>X</u>; If yes, mo/day/yr Sample was submitted Water well disinfected? Yes No <u>X</u>
-- NW --	-- NE --						
-- SW --	-- SE --						

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement Other (specify below) Welded X
2 PVC 4 ABS 7 Fiberglass HD.P/E Threaded
Blank casing diameter 3/4 in. to 1 1/2 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height below land surface 48 in., Weight _____ lbs./ft. Wall thickness or gauge No. SDR 11
TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)
2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.
From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.
From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other
Grout Intervals: From 4 ft. to 145 ft., From ft. to ft., From ft. to ft.
What is the nearest source of possible contamination:
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well HOUSE
Direction from well? SOUTH How many feet? 30

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	18	CLAY			
18	20	CLAYEY SAND HD			
20	41	CLAY BROWN			
41	48	CLAYEY SAND			
48	71	LEASTONE SHALE			
71	75	LEASTONE			
75	121	SHALE, GRAY			
121	127	LEASTONE			
127	145	SHALE, GRAY			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This geothermal well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 1/9/07 and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 760 This Water Well Record was completed on (mo/day/year) 2/1/07
under the business name of ASSOCIATED DRILLING INC by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies 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 to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.