KOLAR Document ID: 1500446

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. _____ Well ID _____

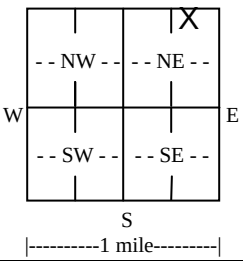
☑ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL: County: Wallace | Fraction: NE ¼ NW ¼ NE ¼ NE ¼ | Section Number: 33 | Township Number: T 11 S | Range Number: R 41 ☐ E ☑ W

2 WELL OWNER: Last Name: Anderson First: Sherly
Business:
Address: 1060 Rd 5
Address:
City: Goodland State: KS ZIP: 67735

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: ☐
From intersection of Wallace county road Zigzag and 11 800' west/south west.

3 LOCATE WELL WITH "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 170 ft.
Depth(s) Groundwater Encountered: 1) 72 ft. 2) ……. ft. 3) ……. ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: 72 ft.
☑ below land surface, measured on (mo-day-yr) 02/29/2020
☐ above land surface, measured on (mo-day-yr)……
Pump test data: Well water was 86 ft. after 1 hrs pumping 30 gpm
Well water was …… ft. after …… hrs pumping …… gpm
Estimated Yield: 50 gpm
Bore Hole Diameter: 9 in. to 170 ft. and …… in. to ……. ft.

5 Latitude: 39.059948 (decimal degrees)
Longitude: 101.871074 (decimal degrees)
Datum: ☑ WGS 84 ☐ NAD 83 ☐ NAD 27
Source for Latitude/Longitude:
☑ GPS (unit make/model: Garmin GPS 5)
(WAAS enabled? ☑ Yes ☐ No)
☐ Land Survey ☐ Topographic Map
☐ Online Mapper: ……

6 Elevation: 3762 ft. ☑ Ground Level ☐ TOC
Source: ☐ Land Survey ☐ GPS ☐ Topographic Map
☑ Other KOLAR

7 WELL WATER TO BE USED AS:
1. Domestic: ☐ Household ☐ Lawn & Garden ☑ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial
5. ☐ Public Water Supply: well ID ……
6. ☐ Dewatering: how many wells? ……
7. ☐ Aquifer Recharge: well ID ……
8. ☐ Monitoring: well ID ……
9. Environmental Remediation: well ID …… ☐ Air Sparge ☐ Soil Vapor Extraction ☐ Recovery ☐ Injection
10. ☐ Oil Field Water Supply: lease ……
11. Test Hole: well ID …… ☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores? …… a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ Other (specify): ……

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 5.5 in. to 170 ft., Diameter …… in. to …… ft., Diameter …… in. to …… ft.
Casing height above land surface 24 in. Weight 2.89 lbs./ft. Wall thickness or gauge No. Sch 40

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 ☐ Other (Specify) ……
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☑ Saw Cut ☐ None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 140 ft. to 170 ft., From …… ft. to …… ft., From …… ft. to …… ft.
GRAVEL PACK INTERVALS: From 25 ft. to 170 ft., From …… ft. to …… ft., From …… ft. to …… ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other ……
Grout Intervals: From 0 ft. to 25 ft., From …… ft. to …… ft., From …… ft. to …… ft.

Nearest source of possible contamination: ✔ No potential source of contamination within 200 ft.
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well
☐ Other (Specify) ……
Direction from well? …… Distance from well? …… ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	20	Clay	153	165	yellow shale
20	30	fine sand	165	170	grey shale
30	33	sandstone			
33	63	sandstone with clay strips			
63	78	sand			
78	105	sand with small clay strips			
105	123	sandy clay			
123	138	sand with small clay strips			
138	153	70% sand 30%sandy clay strips			

Notes:
NWLEPG Permit # 502

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) 02/29/2020 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 213 This Water Well Record was completed on (mo-day-year) 03/09/2020 under the business name of Kemp's Well Service

Send one copy to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well.
KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212