| WATER WELL RECORD Form WWC-5 Division of Water Resources App. No. | | | | | | | | |
|---|--|-------------------------------|-------------------------|---|--|------------------------|----------------------------|--|
| 1 LOCATION OF WATER WELL: | | | Fraction NE NW | | Section Number | | Range Number | |
| | ty: Ellis | | | E 1/4 80E 1/4 | | | R 18 □E 🗗 W | |
| Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here | | | | | | | | |
| 1 | | | | Latitude: (in decimal degrees) Longitude: (in decimal degrees) | | | | |
| 27th St. and Sternberg Dr., Hays, KS | | | | | Elevation: | | | |
| 2 WATER WELL OWNER. | | | | | <u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27 | | | |
| 2 WATER WELL OWNER: D & J Investments RR#, Street Address, Box #: 2700 Sternberg Dr | | | | | Collection Method: | | | |
| City State 7ID Code | | | | | ☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | |
| Havs. KS 67601 | | | | | Est. Accuracy: □ <3 m, □ 3-5 m, □ 5-15 m, □ >15 m | | | |
| 3 LOCATE WELL | | | | | | | | |
| | H AN "X FION BO | | | | | | | |
| SEC | N N | WELL'S STATIC WATER LEVEL. 10 | | | | | | |
| | Pump test data: Well water was 20 | | | | | | | |
| N | EST. YIELD.10gpm. Well water was | | | | | | | |
| w | w E Bore Hole Diameter 10in. to .30ft., andin. toft. | | | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | |
| SWSE ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ Irrigation ☐ Industrial ☑ Domestic-lawn & garden ☐ Monitoring well | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No | | | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | | | |
| 1 mile Water well disinfected? | | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | | | | | |
| CASING JOINTS: ☑ Glued ☐ Clamped ☐ Welded ☐ Threaded | | | | | | | | |
| Casing diameter .5 | | | | | | | | |
| Casing height above land surface. 24 in., Weight 2.91 lbs./ft., Wall thickness or gauge No21 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: From30 | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | |
| From | | | | | | | | |
| Grout Intervals: From .10 | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | |
| Septic tank | | | | | | | | |
| Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well | | | | | | | | |
| □ Watertight sewer lines □ Seepage pit □ Feedyard □ Fertilizer storage □ Oil well/gas well □ Direction from well □ Distance from well | | | | | | | | |
| FROM | ТО | LITHOLOG | | FROM | | | GGING INTERVALS | |
| 0 | 8 | Top Soil | | | | | | |
| 8 | 10 | Clay | | | | | | |
| 10 | 12 | Sand Gravel | | | | | | |
| 12 | 15 | Clay & Rock | | ļ | | ···· | | |
| 15 28 | 28 30 | Weathered shale Blue Shale | | | | | | |
| 20 | 30 | Diue Shale | | - | | | | |
| | | | | | | | | |
| | | | | + | | | | |
| | | | | | | | | |
| 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) .04/03/13 and this record is true to the best of my knowledge and belief. | | | | | | | | |
| Kansas Water Well Contractor's License No. 0199 This Water Well Record was completed on (more)/year 05/01/13 | | | | | | | | |
| under the business name of Karst Water Well Drilling & Service, Inc. by (signature) INSTRUCTIONS: Use ty pewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies | | | | | | | | |
| (white, bl | ue, pink) to | Kansas Depar tment of Health | and E nvironment, Burea | u of Water, Geolo | gy Section, 1000 SW Jac | kson St., Suite 420, T | opeka, Kansas 666 12-1367. | |
| Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Vi sit us at http://www.kdheks.gov/waterwell/index.html. | | | | | | | | |
| KSA 82a | | on mater were index.ittill. | | | Check: Wh | ite Copy, 🔲 Blu | e Copy, Pink Copy | |