

WATER WELL RECORD

Form WWC-5

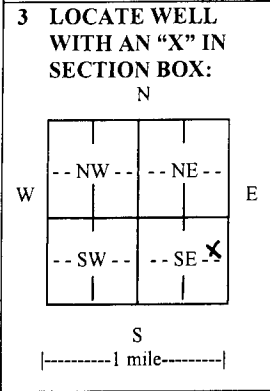
Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Saline	Fraction SE ¼ SE ¼ NE ¼ SE ¼	Section Number 8	Township No. T 14 S	Range Number R 2 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .

Global Positioning System (GPS) information:
 Latitude: .38,84536..... (in decimal degrees)
 Longitude: 97.55851..... (in decimal degrees)
 Elevation:
 Datum: WGS 84, NAD 83, NAD 27
 Collection Method:
 GPS unit (Make/Model:)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m

2 WATER WELL OWNER: Mike Rose
 RR#, Street Address, Box #: 327 N. Holmes Road
 City, State, ZIP Code : Salina, KS 67401



4 DEPTH OF COMPLETED WELL 141..... ft.
 Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL 76..... ft. below land surface measured on mo/day/yr. 6/23/2012.....
 Pump test data: Well water was..... ft. after..... hours pumping..... gpm
 EST. YIELD 3..... gpm. Well water was..... ft. after..... hours pumping..... gpm
 Bore Hole Diameter 9..... in. to 144..... 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
 Was a chemical/bacteriological sample submitted to Department? Yes No
 If yes, mo/day/yr sample was submitted.....
 Water well disinfected? Yes No

5 TYPE OF CASING USED: Steel PVC Other
 CASING JOINTS: Glued Clamped Welded Threaded
 Casing diameter 5..... in. to 121..... ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface 24..... in., Weight 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 None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify)
 SCREEN-PERFORATED INTERVALS: From 121..... ft. to 141..... ft., From ft. to ft.
 From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From 21..... ft. to 144..... ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
 Grout Intervals: From 0..... ft. to 21..... ft., From ft. to ft., From ft. to 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
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well
 Direction from well North..... Distance from well 200'

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	Topsoil	78	88	Shale, very firm, Green
1	1.5	Clay w/3-10mm limestone clasts	88	96	Shale, w/abnt gypsum, Gray
1.5	23	Shale, dry, Pale Yellow	96	110	Shale, Dark Gray w/m gray stringers
23	34	Shale, dry, Pale Yellow-Yellow Brn	110	116	Shale, w/abnt gypsum, Dark M Gray
34	37	Shale, sl. wthrd, Dark Reddish Brn	116	121	Gypsum, selenite
37	39	Shale, sl. wthrd, Gray-Blue Gray	121	123	Shale, w ind. Dark Gray
39	44	Shale, sl. wthrd	123	139	Shale, w ind / occ. gypsum, M Gray
44	62	Shale, w/ind shale, Gray w/gyp lns	139	144	Shale, w ind / tr gyp. Lt. Gray
62	73	Shale, w/ind shale, Gray w/incr gyp			
73	78	Gypsum, hard w/th shale stringers			

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) 6/23/2012..... and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 527..... This Water Well Record was completed on (mo/day/year) 6/23/2012.....
 under the business name of GeoCore Inc..... by (signature) Dale Koff

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 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. I include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.