

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

Blank box for application number

1 LOCATION OF WATER WELL: County: SALINE, Fraction SW 1/4 SW 1/4 SE 1/4 NW 1/4, Section Number 19, Township No. T 14 S, Range Number R 2, Global Positioning System (GPS) information, 2 WATER WELL OWNER: JEFF MAHOLLAND, RR#, Street Address, Box #: 1402 E. REPUBLIC AVE, City, State, ZIP Code: SALINA, KS 67401

3 LOCATE WELL WITH AN "X" IN SECTION BOX: N, W, E, S, 1 mile scale, grid diagram

4 DEPTH OF COMPLETED WELL: 50 ft., Depth(s) Groundwater Encountered (1) 25 ft., (2) ft., (3) ft., WELL'S STATIC WATER LEVEL: 25 ft. below land surface measured on mo/day/yr 06-08-12, Pump test data: Well water was 27 ft. after 1 hours pumping 20 gpm, EST. YIELD: 9 gpm, Well water was 50 ft. after hours pumping gpm, Bore Hole Diameter 9 in. to 50 ft., and in. to ft., WELL WATER TO BE USED AS: Domestic-lawn & garden, Water well disinfected? Yes

5 TYPE OF CASING USED: PVC, CASING JOINTS: Glued, Casing diameter 5 in. to 4 1/2 ft., Diameter in. to in. to ft., Casing height above land surface 12 in., Weight 160 lbs./ft., Wall thickness or gauge No. 5026, TYPE OF SCREEN OR PERFORATION MATERIAL: PVC, SCREEN OR PERFORATION OPENINGS ARE: Mill slot, SCREEN-PERFORATED INTERVALS: 44 ft. to 50 ft., GRAVEL PACK INTERVALS: 22 ft. to 50 ft.

6 GROUT MATERIAL: Bentonite, Grout Intervals: 0 ft. to 22 ft., What is the nearest source of possible contamination: Watertight sewer lines, Direction from well WEST, Distance from well 40

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Rows: 0-3 FILL DIRT, 3-16 CLAY BROWN SILTY, 16-24 SILTY LOAM TAN, 24-49 SAND FINE TO MED. TAN, 49-50 SHALE GRAY

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) 06-08-12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 318, This Water Well Record was completed on (mo/day/year) 06-08-12 under the business name of PEST WORMER... PUMP SERVICE by (signature) Jeff Maholland

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. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html.