| WATER WELL RECORD | | | Form W | Division of Water Resources App. No. | | | | | | |
|--|--|--|--|---|--------------------------------|---------------------------------|---|--|--|--|
| | | OF WATER WELL: | Fraction | | Section Num | | | Range Number | | |
| Cour | ity: Rus | sell | 1/4 SE 1/4 NW | / 1/4 SE 1/2 | | | T 15 S | | | |
| | | Address of Well Location; i | f unknown, distance & | | ioning | System (GPS) in | | | | |
| from | nearest | town or intersection: If at o | wner's address, check | | Latitude: (in decimal degrees) | | | | | |
| | 1N, 3W of Milberger, KS | | | | | Longitude: (in decimal degrees) | | | | |
| ,,,, | THIS OF THIS ORDER, NO | | | | | Elevation: | | | | |
| | 2 WATER WELL OWNER | | | | | | <u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27 | | | |
| | Lagrania Mark INUSS | | | | | Collection Method: | | | | |
| | RR#, Street Address, Box #: 17925 Sticknev Rd. | | | | | GPS unit (Make/Model:) | | | | |
| City | , State, Z | CIP Code : Russell. | KS 67665 | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | | | | |
| 2. LOCATE WELL | | | | | | Est. Accuracy: | | | | |
| 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL .235 | | | | | | | | | | |
| | TION BOX: Depth(s) Groundwater Encountered (1) 150 ft. (2) ft. (3) ft. | | | | | | | | | |
| | WELL'S STATIC WATER LEVEL. 150ft. below land surface measured on mo/day/yr. 04/02/13 | | | | | | | | | |
| l — | Pump test data: Well water wasft. after hours pumping | | | | | | | | | |
| | FOR TITLE D | | | | | | | | | |
| w NV | W EST. YIELD 12gpm. Well water wasft. after | | | | | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No | | | | | | | | | | |
| S 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 | | | | | | | | | | |
| Casing height above land surface in., Weight 4.8lbs./ft., Wall thickness or gauge No. Sch. 40 | | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel | | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel | | | | | | | | | | |
| 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 155 ft. to 175 ft., From 215 ft. to 235 ft. | | | | | | | | | | |
| From ft to ft From ft to ft | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | |
| From | | | | | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout 7 Bentonite Other | | | | | | | | | | |
| Grout Intervals: From .0 | | | | | | | | | | |
| 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 none- in pasture | | | | | | | - in nasture | | | |
| Direc | tion from | n well Seepage p | n Lireedyard | | | | | - III pasture | | |
| FROM | TO | LITHOLOG | | FROM | | | | GGING INTERVALS | | |
| 0 | 1 | top soil | 101/00 | 1 100101 | TO PITE | io, ic | A (COIL.) OF PLU | COMO INTERVALS | | |
| 1 | 2 | clav | | - | | | | an age of the same | | |
| 2 | 18 | limestone | And the second s | | | | | | | |
| 18 | 150 | shale | - | | | | | | | |
| 150 | 235 | sand rock with shale st | rooko | | | | | | | |
| 130 | 200 | Sand fock with shale sti | Gans | | | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | | | · · · · · · · · · · · · · · · · · · · | | | |
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| | | | | | | | | | | |
| 7 CONTRACTORS OR LANDOWNERS CERTIFICATION OF THE STATE OF | | | | | | | | | | |
| 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) .04/02/13 and this record is true to the best of my knowledge and belief. | | | | | | | | | | |
| Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/year) 04/02/13 under the business name of Kelly's Water Well Service, Inc. by (signature) | | | | | | | | | | |
| under th | e busine | ss name of | PLEAGE BREGGERRY | 7d parver | by (signatur | e) 7 . | ianny. | o soal | | |
| (white bh | ue, pink) t | Use ty pewriter or ball point pen. Kansas Depar tment of Health | <u>r выявы РКЕЗУ FIRML)</u> and Environment Bureau | _and <i>PKINT_</i> cl of Water_Geol | early. Please fill in | bianks SW I20 | and check the correct | answers. Send three copies | | |
| (white, blue, pink) to Kansas Depar tment of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, 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-1212

Check: White Copy, Blue Copy, Pink Copy