

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: Ellsworth | Fraction ¼ SW ¼ NW ¼ NW ¼ | Section Number 2 | Township Number T 15 S | Range Number R 8 <input type="checkbox"/> E <input checked="" type="checkbox"/> W |
|---|------------------------------|---------------------|---------------------------|--|

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|---|---|
| 2 WELL OWNER: Last Name: Kratzer First: John Business Address: 715 17th Road Address: Ellsworth State: KS ZIP: 67439 | 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: <input type="checkbox"/> 2N, 2E of Ellsworth, KS |
|---|---|

| | | | | | | | | |
|--|--|--|---|--|--|--|--|---|
| 3 LOCATE WELL WITH "X" IN SECTION BOX: N <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> <tr> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: left;">X</td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> </table> W E S ----- 1 mile ----- | | | X | | | | 4 DEPTH OF COMPLETED WELL:168..... ft. Depth(s) Groundwater Encountered: 1)110..... ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL:110..... ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr)12/29/17..... <input type="checkbox"/> above land surface, measured on (mo-day-yr)..... Pump test data: Well water was ft. after hours pumping gpm Well water was ft. after hours pumping gpm Estimated Yield:15.....gpm Bore Hole Diameter:8..... in. to ft. and in. to ft. | 5 Latitude:(decimal degrees) Longitude:(decimal degrees) Horizontal Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model:) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: |
| | | | | | | | | |
| X | | | | | | | | |
| | | | | | | | | |

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

Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:

Water well disinfected? Yes No

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| 8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other | | CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded | |
| Casing diameter5..... in. to148..... ft., Diameter in. to ft., Diameter in. to ft. | | Casing height above land surface12..... in. Weight2.8..... lbs./ft. Wall thickness or gauge No. Sch. 40 | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | |
| <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | |
| <input type="checkbox"/> Continuous Slot <input type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input checked="" type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) | | | |
| SCREEN-PERFORATED INTERVALS: From ..148..... ft. to ..168..... ft., From ft. to ft., From ft. to ft. | | | |
| GRAVEL PACK INTERVALS: From ..23..... ft. to ..168..... ft., From ft. to ft., From ft. to ft. | | | |

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| 9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other | |
| Grout Intervals: From0..... ft. to ..23..... ft., From ft. to ft., From ft. to ft. | |
| Nearest source of possible contamination: | |
| <input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage <input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input type="checkbox"/> Sewage Lagoon <input type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well <input type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well <input checked="" type="checkbox"/> Other (Specify) house | |
| Direction from well? North Distance from well? ..65..... ft. | |

| 10 FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|---------|-----|----------------|------|----|--|
| 0 | 1 | top soil | | | |
| 1 | 7 | clay | | | |
| 7 | 12 | soft limestone | | | |
| 12 | 15 | shale | | | |
| 15 | 17 | sand rock | | | |
| 17 | 138 | shale | | | |
| 138 | 168 | sand rock | | | |
| | | shale bottom | | | |

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) **12/29/17**..... 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) **01/03/17**..... under the business name of **Kelly's Water Well Service, Inc.**..... Signature *Kathryn L. Glad*.....