249 11639 DW-1-12

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Barton | Fraction: 1/4 SE 1/4 NE 1/4 SE 1/4 | Section Number: 6 | Township No.: T 18 S | Range Number: R 15 ☐E ☒W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐

Approximately 1.5 miles south and 2 miles east of Otis.

Global Positioning System (GPS) information:

Latitude: 38.512561 (in decimal degrees)

Longitude: -99.015157 (in decimal degrees)

Elevation: unknown

Datum: ☐ WGS 84, ☒ NAD 83, ☐ NAD 27

Collection Method:

☒ GPS unit (Make/Model: WAAS)

☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey

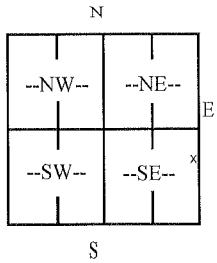
Est. Accuracy: ☐ <3 m, ☒ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: Mike Hekele

RR#, Street Address, Box #: 1184 NE 90 Ave.

City, State, ZIP Code : Claflin, KS 67525

3 LOCATE WELL WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 79 ft.

Depth(s) Groundwater Encountered (1) ____ ft. (2) ____ ft. (3) ____ ft.

WELL'S STATIC WATER LEVEL 10.50 ft. below land surface measured on mo/day/yr 05/24/12

Pump test data: Well water was Not checked ft. after ____ hours pumping ____ gpm

EST. YIELD ____ gpm. Well water was ____ ft. after ____ hours pumping ____ gpm

Bore Hole Diameter 9 in. to 80 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 Stock 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 10 ft., Diameter 5 in. to 25 ft., Diameter 5 in. to 57 ft.

Casing height above land surface 24 in., Weight 2.36 lbs./ft., Wall thickness or gauge No. .214

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 10 ft. to 15 ft., From 57 ft. to 77 ft.

From 25 ft. to 40 ft., From ____ ft. to ____ ft.

GRAVEL PACK INTERVALS: From 10 ft. to 80 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 10 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 Windmill

☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well

Direction from well Northwest Distance from well 50'

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Topsoil	40	42	Clay, gray, hard
2	9	Clay, brown	42	50	Shale, black
9	12	Clay, sand, mix 50/50	50	65	Shale, black, with streaks, hard, sandstone
12	21	Clay, tan, soft	65	67	Sandstone, black, hard
21	25	Clay, tan, sandy	67	69	Clay, gray
25	30	Clay, tan, with streaks, yellow, limestone	69	77	Sandstone, gray, with gray clay
30	37	Clay, yellow, white, firm, with streaks,	77	80	Clay, gray, with brown limestone streaks
		hard, gray, sandstone			
37	40	Limestone, brown & black, very hard with			Richard Harper approved shallow grout
		hard brown sandstone			waiver on 5-24-12

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) 05/24/12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 05/30/12 under the business name of Clarke Well & Equipment, Inc. by (signature) [signature]

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 785-296-5522. 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.

KSA 82a-1212

Check: ☒ White Copy, ☐ Blue Copy, ☐ Pink Copy