WATER WELL RECORD)	Form W	WC-5	Division of Wate	r Resources App. No	o. L	
1 LOCATION OF WATER V County: McPherson	VELL:	Fraction 1/4 NE 1/4 NE	1/4 SW 1/4	Section Number 19	Township No. T 19 S		
Street/Rural Address of Well Location; if unknown, distance & direction				Global Positioning System (GPS) information:			
from nearest town or intersection: If at owner's address, check here				Latitude: .38.384428 (in decimal degrees)			
Union Pacific Railroad Derailment Site				Longitude: 97.479428 (in decimal degrees)			
Milkepost 207.7, Galva, KS 67443				Elevation: 1555			
				<u>Datum</u> : ☐ WGS 84, ☑ NAD 83, ☐ NAD 27			
2 WATER WELL OWNER: UPRR				Collection Method:			
RR#, Street Address, Box #:				GPS unit (Make/Model:)			
City, State, ZIP Code :			☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m				
2 LOCATE WELL				Est. Accuracy: V	3 m, 3-5 m,	5-15 m, >15 m	
3 LOCATE WELL WITH AN "X" IN 4 DE	DTU OF	COMPLETED WELI	18	A			
					ft. (2).N/A ft. (3).N/A ft.		
WEL	N WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr						
EST. YIELD. N/A						ning N/A gpm	
						burg gpm	
THE THE TOP TO BE HOPE AS ELECTION AS ELEC							
Domestic D Feedlet D Oil field water supply Develoring D Other (Specify below)							
SW SE							
Was a chemical/bacteriological sample submitted to Department? Yes No							
s If yes, mo/day/yr sample was submitted N/A							
water well disinfected? Yes No							
5 TYPE OF CASING USED: Steel V PVC Other							
CASING JOINTS: Glued Clamped Welded Threaded							
Casing diameter .2 in. to .8 ft., Diameter .N/A in. to .N/A ft., Diameter .N/A ft.							
Casing height above land surface. 30 in., Weight N/A lbs./ft., Wall thickness or gauge No. Schedule 40							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
Steel Stainless St				Other (Specify)			
☐ Steel ☐ Stainless Steel							
SCREEN OR PERFORATION OPENINGS ARE:							
☐ Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes							
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)							
SCREEN-PERFORATED INTERVALS: From . 8							
From N/A ft. to N/A ft., From N/A ft. to N/A ft.							
GRAVEL PACK INTERVALS: From . 6 ft. to . 18 ft., From . N/A ft. to . N/A ft. From . N/A ft. to . N/A ft. From . N/A ft. From . N/A ft. From . N/A ft. Tt. From . N/A ft. Tt. From . N/A ft. Tt. St. St. St. St. St. St. St. St. St. S							
From N/A ft. to N/A ft., From N/A ft. to N/A ft.							
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete 0-2 feet							
Grout Intervals: From .2							
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 ☐ Railroad Derailment ☐ Fertilizer storage ☐ Oil well/gas well ☐ Railroad Derailment ☐ Fertilizer storage ☐ Oil well/gas well ☐ Railroad Derailment ☐ Fertilizer storage ☐ Oil well/gas well ☐ Oil well/ga							
Direction from well Northwe	_ secpage p est	n □ reedyard [from well 7.5-feet	is well		
	ITHOLOG	IC LOG	FROM		OG (cont.) or PLI	IGGING INTERVALS	
		esilt weak	TROM	TO ETTHO: D	oo (cont.) or The	GGITTO HTTERVILES	
Ced of y	LA LINC	K-JIT WEAK	 				
	ty Com	15: Elon + 20	 				
	th cow	HULL CAROLON	 				
12 12 2(9× 2) X		compact (400) st	 		· · · · · · · · · · · · · · · · · · ·		
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Yellow	7 ~ -		 				
Wet a	13,5		 		······································		
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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) .12-8-2014 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No. 759 This Water Well Record was completed for (mo/http://ear) 2/1/2015							
under the business name ofR.				by (signature)			
INSTRUCTIONS: Use typewriter or	ball point per	n. PLEASE PRESS FIRMLY	and <u>PRINT</u> cle	arly. Please fill in blanks	and check the correct	answers. Send one copy 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							
i i ejephone /85-296-5524. Send one co	DOV TO WALL	EK WELL UWNEK and reta	an one for your i	ecorus. Include lee of \$	D.OU IOF CACH CONSTRUC	icu well. Visit üs at	