		Supply Well LL RECORD Form WWC-5			Division of Water Resources App. No.				
		OF WATER WELL:	Fraction	· NIVA/	Section	on Number	Township No.	Range Number	
	y: /Rural A	Rice Address of Well Location;				7 I Positioning	T 19 S System (GPS) inf	R 10 DE W	
from nearest town or intersection: If at owner's address, check here						00.440400			
Approximately 4 miles north and 5.5 miles east of Ellinwood.						itude:	-98.475831	(in decimal degrees)	
						Latitude: 38.475408 (in decimal degrees)  Longitude: -98.475831 (in decimal degrees)  Elevation: Unknown  Datum: □ WGS 84, ☒ NAD 83, □ NAD 27			
2 WATER WELL OWNER: Katherine Karber Heirs RR#, Street Address, Box #: P.O. Box 56						Collection Method: GPS unit (Make/Model: WAAS			
City, State, ZIP Code : Hanover, KS 66945						☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
3 LOCATE WELL						ccuracy: <	3 m, 🛛 3-5 m,	5-15 m, >15 m	
WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 69 ft.									
SECTION BOX:  Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft.  WELL'S STATIC WATER LEVEL 17 ft. below land surface measured on mo/day/yr 08/08/16									
Pump test data: Well water was not checked ft. after hours pumping gpm									
U -NWNE EST. YIELD gpm. Well water was ft. after hours pumping gpm Bore Hole Diameter 9 in. to 70 ft., and in. to ft.									
w       E   Bore Hole Diameter   9   in. to   70   ft., and   in. to   ft.									
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well SWSE Domestic Feedlot Oil field water supply Dewatering Other (Specify below)									
Irrigation Industrial Domestic-lawn & garden Monitoring well Supply Well									
Was a chemical/bacteriological sample submitted to Department? Yes No  S If yes, mo/day/yr sample was submitted									
5 TYPE OF CASING USED: Steel  PVC Other Other									
CASING JOINTS: X Glued Clamped Welded Threaded Other (Specify)									
Casing diameter 5 in. to 47 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in., Weight 2.30 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 47 ft. to 67 ft., From ft. to ft.									
	CD A M	EL PACK INTERVALS:	From 20	ft. to	70	ft., From	ft.	to ft.	
·	GKAV	EL PACK INTERVALS:	From	ft. to		ft., From		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 20 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 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well None Known								None Known	
Direction from well  Distance from well									
FROM	TO	LITHOLOG	IC LOG	FROM	ТО	LITHO. LO	OG (cont.) <u>or</u> PLU	JGGING INTERVALS	
0 4	12	Topsoil Clay, brown, with very	fine sand						
12	14	Clay, brown, hard							
14	29	Clay, gray, brown, ha							
29 37	37 45	Clay, tan, sandy, hard Sandstone, tan, with							
45	67	Sand & gravel, fine to				William 1			
67	70	Clay, brown, gray							
						****		<b>*******</b>	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged and this record is true to the best of my knowledge and belief.									
under my jurisdiction and was completed on (mo/day/year) 08/08/16 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) 08/10/16									
under the business name of Clarke Well & Equipment, Inc. by (signature)									
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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									