

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

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| 1 LOCATION OF WATER WELL: County: <u>Rush</u> | Fraction <u>SW 1/4 NE 1/4 NE 1/4</u> | Section Number <u>22</u> | Township Number <u>T 19 S</u> | Range Number <u>R 16 E</u> W |
| Distance and direction from nearest town or city street address of well if located within city? Approximately <u>4 1/4 miles south and 3 1/4 miles west of Albert</u> | | Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>38.389447</u> Longitude: <u>-99.074288</u> Elevation: <u>unknown</u> Datum: <u>NAD 83</u> Data Collection Method: <u>WAAS GPS Unit</u> | | |
| 2 WATER WELL OWNER: <u>Dr. Richard Burkey</u> RR#, St. Address, Box # : <u>3709 Forest Ave.</u> City, State, ZIP Code : <u>Great Bend, KS 67530</u> | | | | |

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| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S | | 4 DEPTH OF COMPLETED WELL <u>61</u> ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <u>27.3</u> ft. below land surface measured on mo/day/yr. <u>9-20-06</u> Pump test data: Well water was <u>not checked</u> ft. after _____ hours pumping _____ gpm Est. Yield <u>unknown</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well <u>Stock Well</u> Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yrs _____ Sample was submitted _____ Water well disinfected? Yes _____ No <input checked="" type="checkbox"/> |
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| 5 TYPE OF CASING USED: | 5 Wrought Iron 8 Concrete tile | CASING JOINTS: <u>Glued</u> <input checked="" type="checkbox"/> Clamped _____ |
| 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) _____ | 7 Fiberglass _____ | Welded _____ |
| <input checked="" type="radio"/> PVC 4 ABS | | Threaded _____ |
| Blank casing diameter <u>5</u> in. to <u>34</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. | Casing height above land surface <u>24</u> in., weight <u>.214</u> lbs./ft. Wall thickness or gauge No. <u>2.36</u> | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="radio"/> PVC 9 ABS 11 Other (Specify) _____ | 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) | |
| SCREEN OR PERFORATION OPENINGS ARE: | | |
| 1 Continuous slot <input checked="" type="radio"/> Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) | 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (Specify) _____ | |
| SCREEN-PERFORATED INTERVALS: From <u>34</u> ft. to <u>59</u> ft., From _____ ft. to _____ ft. | | |
| GRAVEL PACK INTERVALS: From <u>23</u> ft. to <u>60</u> ft., From _____ ft. to _____ ft. | | |

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| 6 GROUT MATERIAL: | 1 Neat Cement 2 Cement grout 3 Bentonite 4 Other _____ | Bentonite Holeplug _____ |
| Compacted Soil _____ | Grout Intervals: From <u>0</u> ft. to <u>3</u> ft., From _____ ft. to _____ ft., From <u>3</u> ft. to <u>23</u> ft. | |
| What is the nearest source of possible contamination: | | |
| 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) | 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well | 15 Oil well/gas well <u>None known</u> |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage | | |
| Direction from well? _____ | | How many feet? _____ |

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|--|------|----|---|
| 0 | 5 | Topsoil | 58 | 60 | Limestone, yellow, soft, with clay, gray and yellow |
| 5 | 27 | Clay, brown, hard | | | |
| 27 | 31 | Clay, brown, sandy, soft, silty | | | |
| 31 | 38 | Clay, brown, with streaks of gravel, fine | | | |
| 38 | 46 | Drift, gravel, fine to medium, loose, with clay, brown, soft, sandy, and streaks of sandstone, soft, brown | | | |
| 46 | 51 | Clay, brown, soft, sandy, with drift, fine to medium, 50/50 mix | | | |
| 51 | 58 | Clay, gray and red, hard with sandstone streaks | | | |

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) 9-20-06 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) 10-5-06
 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, underline or circle the correct answers. Send top three copies 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 to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.