

WATER WELL RECORD

Form WWC-5

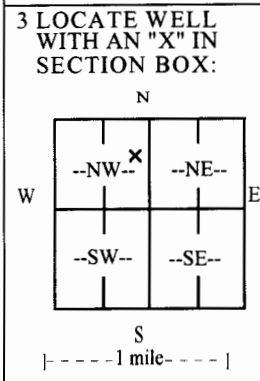
Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: <u>Rush</u>	Fraction <u>1/4 SE 1/4 NE 1/4 NW 1/4</u>	Section Number <u>17</u>	Township No. <u>T 19 S</u>	Range Number <u>R 17</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
 Approximately 3 3/4 miles south and 3 1/2 miles west of Timken

Global Positioning System (GPS) information:
 Latitude: 38.405662 (in decimal degrees)
 Longitude: -99.227917 (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: Gregg Fischer
 RR#, Street Address, Box #: 1853 N. Hwy 281
 City, State, ZIP Code : Great Bend, KS 67530



4 DEPTH OF COMPLETED WELL 140 ft.

Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
 WELL'S STATIC WATER LEVEL 96.41 ft. below land surface measured on mo/day/yr 6/17/10
 Pump test data: Well water was not checked ft. after _____ hours pumping _____ gpm
 EST. YIELD unknown gpm. Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 9 in. to 140 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 97 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface 36 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 97 ft. to 137 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 25 ft. to 140 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 25 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
 Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	5	Topsoil	57	72	Shale, black
5	14	Clay, light gray, hard	72	77	Clay, dark gray, with sandstone streaks
14	21	Clay, dark gray, hard	77	80	Sandstone, hard, gray
21	25	Shale, dark gray, hard, with limestone streaks	80	90	Clay, dark gray
			90	101	Clay, white, with sandstone streaks, 50/50 mix
25	31	Limestone, white	101	109	Clay, grayish brown, with sandstone streaks, 50/50 mix
31	36	Shale, dark gray, hard			
36	42	Limestone, white	109	122	Sandstone, white, with clay streaks, gray, 50/50 mix
42	43	Shale, black	122	137	Clay, light gray with sandstone, 50/50 mix
43	57	Limestone, gray, hard, with shale streaks	137	145	Shale, black

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) 6/17/10 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) 6/23/10
 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>.