WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. _____

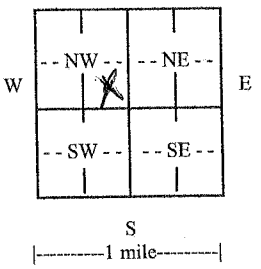
1 LOCATION OF WATER WELL: County: Rush | Fraction: NW ¼ SE ¼ SE ¼ ¼ | Section Number: 24 | Township No.: T 19 S | Range Number: R 19 ☐E ☑W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐. 4 W of Rush Center to 210 Rd S 6 miles from 210. Well is on east side of road.

Global Positioning System (GPS) information:
Latitude: 38.22.52 N (in decimal degrees)
Longitude: 99.22.45W (in decimal degrees)
Elevation: .....
Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27
Collection Method:
☑ GPS unit (Make/Model: I Phone 5)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: Drrick Colglaizer
RR#, Street Address, Box #: Rt 1 Box 30
City, State, ZIP Code : Rozel, Ks 67574

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



4 DEPTH OF COMPLETED WELL 317 ft.
Depth(s) Groundwater Encountered (1) 268 ft. (2) 281 ft. (3) 301 ft.
WELL'S STATIC WATER LEVEL 203 ft. below land surface measured on mo/day/yr. 07/24/14
Pump test data: Well water was 210 ft. after 12 hours pumping 25 gpm
EST. YIELD 25 gpm. Well water was ..... ft. after ..... hours pumping ..... gpm
Bore Hole Diameter 10 in. to 317 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 .....
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 317 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 36 in., Weight 3.53 lbs./ft., Wall thickness or gauge No. 17
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 317 ft. to 257 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 317 ft. to 40 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 40 ft. to 0 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 .....
Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Top Soil	215	235	White Clay
2	12	Rock, Sand	235	260	Red Clay
12	15	Limestone clay	260	267	Grey Clay
15	94	Shale	267	300	Sand rock layers w/clay
94	140	Dakota Clay	300	315	Sand Rock
140	160	Clay & Shale	315	317	Light Grey clay
160	179	Dakota clay			
179	183	Soft Dakota Grey Clay			
183	201	Dakota Clay			
201	214	Soft Light Grey Clay			

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) 07/24/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 0199 This Water Well Record was completed on (mo/day/year) 07/29/14 under the business name of Karst Water Well Drilling & Service, Inc by (signature) .....

INSTRUCTIONS: Use typewriter or ball point pen. *PLEASE PRESS FIRMLY* and *PRINT* clearly. 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 http://www.kdheks.gov/waterwell/index.html

KSA 82a-1212