|  | WATER WELL RE                           | CORD Form WWC-5                | KSA 82a-                          | 1212 ID No                | ),                                     |  |
|--|---|--------------------------------|-----------------------------------|---------------------------|--|--|
| 1 LOCATION OF                                | A                                       | 0- 0-                          | l                                 | tion Number               | Township Number                        | Range Number   |
|  | ecatur 16 y                             |                                | /4                                | 34                        | T / \$                                 | P SO EW  |
| Distance and direction                       | on from nearest town or city street     | address of well if located     | within city?                      |                           | GPS N39                                | 55 42.4  |
| 2 WATER WELL C                               | WNFR:                                   |                                |                                   |                           | <del></del>                            | <del>39 56.6</del>   |
| RR#, St. Address, B<br>City, State, ZIP Code | ox# : RR#3 Box 7                        | 3C                             |                                   |                           |  | Division of Water Resources  |
| 3 LOCATE WELL'S                              | Ober 1 in kg                            | COMPLETED WELL                 | e.e                               | ft. ELEVAT                | ION:                                   | 3 ft   |
| AN "X" IN SECTIO                             |   |                                |                                   |                           |  |  |
| 1  | WELL'S STAT                             | IC WATER LEVEL3                | ളft. beld<br>r was                | w land surface            | measured on mo/day/yr                  | pumping gpri   |
| - +NW  | Est. Yield                              | gpm: Well wate                 | was                               | ft. a                     | ter hours                              | pumping gpm  |
| 1000   | WELL WATER                              |                                | Public water s<br>Dil field water |                           |  | Injection well   |
| w ÷  | E 2 Irrigation                          |                                |                                   |                           | •                                      | Other (Specify below)  |
| '  |   |                                |                                   |                           |  |  |
| SW   | Was a chemic mitted                     | al/bacteriological sample      | submitted to I                    |                           | ter Well Disinfected? Yes              | mo/day/yrs sample was sub<br>No<br>X   |
| 5 TYPE OF BLAN                               | S I CASING USED:                        | 5 Wrought iron                 | 8 Concre                          | te tile                   | CASING JOINTS: GIL                     | jedX Clamped   |
| 1 Steel                                      | 3 RMP (SR)                              | 6 Asbestos-Cement              | 9 Other (                         | specify below)            | We                                     | lded   |
| PVC  | 4 ABS                                   | 7 Fiberglass                   |                                   |                           |  | readed   |
| Blank casing diamet                          | er4 · 154in to<br>land surface 2        | ft., Dia                       |                                   | in. to                    | ft., Dia                               | ft.  |
|  | OR PERFORATION MATERIAL:                | in., weight                    | 7 <b>.</b> PV                     |                           | os./rr. vvali trickness or gua         | _  |
| 1 Steel                                      | 3 Stainless Steel                       | 5 Fiberglass                   |                                   | P (SR)                    |  | fy)  |
| 2 Brass                                      | 4 Galvanized Steel                      | 6 Concrete tile                | 9 AB                              | S                         | 12 None used (d                        | pen hole)  |
|  | ORATION OPENINGS ARE:                   |                                | ed wrapped                        |                           | 8 Saw cut                              | 11 None (open hole)  |
| 1 Continuous sl<br>2 Louvered shu            |   | 7 Torch                        | vrapped<br>cut                    |                           | 9 Drilled holes 10 Other (specify)     | • ~:ft.  |
| SCREEN-PERFORA                               |   | 45 # 10                        | 65                                |                           |  | oft.   |
|  | From                                    | ft. to                         | •••••                             | ft., From                 | ft. t                                  | o ft.  |
| GRAVEL P                                     | PACK INTERVALS: From                    |                                | le 5                              | ft., From                 | ft. t                                  | oft.   |
|  | 1 10111                                 |                                |                                   | 10, 1 10/11               |  | <b>O</b>   |
| GROUT MATER                                  |   | 2 Cement grout                 | 2 Bent                            | onite 4                   |  |  |
|  | om                                      | ft., From                      | ft. to                            |                           |  |  |
| 1 Septic tank                                | source of possible contamination:       | 7 Pit priva                    |                                   | 10 Livesto<br>11 Fuel sto |  | Abandoned water well Oil well/Gas well   |
| 2 Sewer lines                                | 4 Lateral lines<br>5 Cess pool          |                                | , ,                               |                           |  | Other (specify below)  |
| 3 Watertight sev                             | 9 Feedyard                              |                                |                                   | ide storage               |  |  |
| Direction from well?                         |   |                                |                                   | How many                  | feet?                                  |  |
| FROM TO                                      | LITHOLOGIC                              | LOG                            | FROM                              | то                        | PLUGGING I                             | NTERVALS   |
| 0 37   | soil and clay                           |                                |                                   |                           |  | **************************************   |
| 37 41  | - softaclay                             |                                |                                   |                           |  | AND THE PROPERTY OF THE PARTY O |
| 41 48  | soft clay & tra                         | ce of sand                     |                                   |                           |  |  |
| 48 54  | fine to coarse                          | sand and                       |                                   |                           | <del>(</del>                           |  |
| 54 63  | clay 1/2 & 1/2                          | and                            | -                                 |                           |  |  |
| 54 63  | fine to coarse                          | sand, some                     |                                   |                           |  |  |
|  | small gravel                            | <del></del>                    |                                   |                           |  |  |
| 63 70  | shale                                   |                                |                                   |                           |  |  |
|  |   |                                |                                   | •                         | ************************************** | <del></del>  |
|  |   |                                |                                   |                           | <del></del>                            |  |
|  |   |                                |                                   |                           | · · · · · · · · · · · · · · · · · · ·  |  |
|  |   |                                |                                   |                           |  |  |
|  | OR LANDOWNER'S CERTIFICA                |                                |                                   |                           |  |  |
| ompleted on (mo/day.                         | /year) 9-11-0 /                         | ·                              |                                   | and this reco             | rd is true to the best of my k         | nowledge and belief. Kansas  |
|  | 's Licence No                           | ^ .)                           | Vell Record v                     | as completed              | on (mo/day/yr)                         | Y \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \  |
| nder the business na                         | me of Surton W                          | ell Orilling                   | ill in blacke                     |                           | gnature) Jour                          | s to Kansas Denartment of Health   |
| INICIOLICTICANO LICA NA                      | DEWINELOF DAIL DOIDT DED PLEASE PRESS E | CONCLUDIO CHINI CHERRY, PIREER | ni ili vigiliks. Unde             |                           |  | minous separations of ficality   |

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of 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 <u>constructed</u> well.