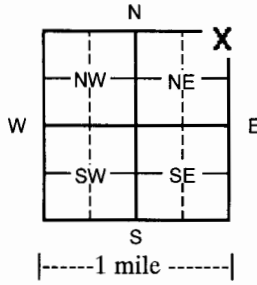
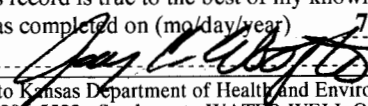


WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No. **MW 7 DD**

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																																			
County: Barton		1/4 NE 1/4 NE 1/4 NE 1/4		3		T 20 S		R 14 ☐ E ☐ XW																																																																			
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ approx 100 ft east of SW 6th St + R St.				Global Positioning System (GPS) information:																																																																							
2 WATER WELL OWNER: EPA Region 7 RR#, St. Address, Box # : 901 North 5th St City, State, ZIP Code : Ks City, Ks 66101				Latitude: _____ (in decimal degrees)																																																																							
				Longitude: _____ (in decimal degrees)																																																																							
				Elevation: _____																																																																							
				Datum: ☒ WGS 84, ☐ NAD 83, ☐ NAD 27																																																																							
3 LOCATE WELL WITH AN "X" IN SECTION BOX: 				4 DEPTH OF COMPLETED WELL 125 ft.																																																																							
				Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.																																																																							
				WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr																																																																							
				Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm																																																																							
				EST. YIELD _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm																																																																							
				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 MW-7 DD																																																																							
				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 2 in. to 100 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.																																																																											
Casing height above land surface 0 in., Weight .716 lbs./ft. Wall thickness or gauge No. .154																																																																											
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 100 ft. to 125 ft., From _____ ft. to _____ ft.																																																																											
From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																																																											
GRAVEL PACK INTERVALS:																																																																											
From 98 ft. to 125 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 .5 ft. From .5 ft. to 98 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 Contaminated site																																																																											
Direction from well _____ Distance from well _____																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>2</td> <td>Surface</td> <td></td> <td></td> <td>strks</td> </tr> <tr> <td>2</td> <td>6</td> <td>Loess</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6</td> <td>23</td> <td>fine to med sd & med gravel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>23</td> <td>35</td> <td>Fine to med sand & med gravel w/clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>Strks</td> <td></td> <td></td> <td></td> </tr> <tr> <td>35</td> <td>43</td> <td>clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>43</td> <td>93</td> <td>fine to med sd & small gravel w/clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>Strks</td> <td></td> <td></td> <td></td> </tr> <tr> <td>93</td> <td>102</td> <td>Clay w/sand strks</td> <td></td> <td></td> <td></td> </tr> <tr> <td>102</td> <td>125</td> <td>Fine to med sand & small gravel w/clay</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	2	Surface			strks	2	6	Loess				6	23	fine to med sd & med gravel				23	35	Fine to med sand & med gravel w/clay						Strks				35	43	clay				43	93	fine to med sd & small gravel w/clay						Strks				93	102	Clay w/sand strks				102	125	Fine to med sand & small gravel w/clay			
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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) 07-02-10 and this record is true to the best of my knowledge and belief.																																																																											
Kansas Water Well Contractor's License No. 554 or 783 . This Water Well Record was completed on (mo/day/year) 7-16-10																																																																											
under the business name of Woofert Pump & Well Inc. by (signature) 																																																																											
INSTRUCTIONS: 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 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 .																																																																											