WATER WELL RECORD Form WWC-5

☑ Original Record ☐ Correction ☐ Change in Well Use

Division of Water Resources App. No. _____ Well ID _____

1 LOCATION OF WATER WELL: County: Rice

Fraction	Section Number	Township Number	Range Number
¼ ¼ ¼ ¼	29	T 20 S	R 8 ☐ E ☑ W

2 WELL OWNER: Last Name: First:
Business: Sleeper Hulsizer Land, LLC
Address: 32 NE Monroe St.
Address:
City: Portland State: OR ZIP: 97212

Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☐
Approximately 4 miles south and 2 miles west of Lyons.

3 LOCATE WELL WITH "X" IN SECTION BOX:

N
- - NW - - | - - NE - -
W | E
- - SW - - | - - SE - -
S
|----------1 mile---------|

4 DEPTH OF COMPLETED WELL: 60 ft.
Depth(s) Groundwater Encountered: 1) 16.6 ft. 2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: 16.60 ft.
☑ below land surface, measured on (mo-day-yr) 11/06/2020
☐ above land surface, measured on (mo-day-yr).....
Pump test data: Well water was ..... ft. after..... hours pumping ..... gpm
Well water was ..... ft. after..... hours pumping ..... gpm
Estimated Yield: 0 gpm
Bore Hole Diameter: 9 in. to 60 ft. and ..... in. to ..... ft.

5 Latitude: 38.286432 (decimal degrees)
Longitude: 98.238396 (decimal degrees)
Datum: ☐ WGS 84 ☐ NAD 83 ☑ NAD 27
Source for Latitude/Longitude:
☐ GPS (unit make/model: .....) (WAAS enabled? ☐ Yes ☐ No)
☐ Land Survey ☐ Topographic Map
☐ Online Mapper: .....

6 Elevation: 1670 ft. ☑ Ground Level ☐ TOC
Source: ☐ Land Survey ☐ GPS ☐ Topographic Map ☑ Other KOLAR

7 WELL WATER TO BE USED AS:
1. Domestic: ☐ Household ☐ Lawn & Garden ☑ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial
5. ☐ Public Water Supply: well ID .....
6. ☐ Dewatering: how many wells? .....
7. ☐ Aquifer Recharge: well ID .....
8. ☐ Monitoring: well ID .....
9. Environmental Remediation: well ID ..... ☐ Air Sparge ☐ Soil Vapor Extraction ☐ Recovery ☐ Injection
10. ☐ Oil Field Water Supply: lease .....
11. Test Hole: well ID ..... ☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores? ..... a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ Other (specify): .....

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☑ No If yes, date sample was submitted: .....
Water well disinfected? ☑ Yes ☐ No

8 TYPE OF CASING USED: ☐ Steel ☑ PVC ☐ Other ..... CASING JOINTS: ☑ Glued ☐ Clamped ☐ Welded ☐ Threaded
Casing diameter 5 in. to 48 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 24 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 ☐ Other (Specify) .....
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 48 ft. to 58 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 20 ft. to 60 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other .....
Grout Intervals: From 0 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

Nearest source of possible contamination: ✔ No potential source of contamination within 200 ft.
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well
☐ Other (Specify) .....
Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	5	Topsoil			
5	12	Clay, brown, dark, sandy			
12	59	Sand & gravel, coarse to fine			
59	60	Clay, brown			
			Notes:		

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☑ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year) 11/06/2020 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) 11/10/2020 under the business name of Clarke Well & Equipment, Inc.

Send one copy to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well.
KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212