| WATE | D WE | LL RECORD | Form WV | VC-5 | Division of Wate | or Descurees Ann. N | 20150243 | |
|---|--|-----------------------------|-------------------|--|---|---------------------------------|-----------------------|--|
| LOCATION OF WATER WELL: Fraction | | | | 70-5 | Division of Water Resources App. No. Section Number Township No. Range Number | | | |
| | ity: Stat | | 1/4 SW 1/4 SE | 1/4 SW 1/4 | 4 | T 21 S | R 12 □E ☑W | |
| | | Address of Well Location; i | | Global Positioning System (GPS) information: | | | | |
| | from nearest town or intersection: If at owner's address, check here . | | | | | Latitude: (in decimal degrees) | | |
| | 9 1/2 North, 1/4 East of Hudson | | | | | Longitude: (in decimal degrees) | | |
| 9 1/2 NOITH, 1/4 East Of Hudsoff | | | | | Elevation: | | | |
| | | | | | Datum: WGS 84, NAD 83, NAD 27 | | | |
| 2 WATER WELL OWNER: H & B Petroleum | | | | | Collection Method: | | | |
| RR#, Street Address, Box #: PO Box 277 | | | | | GPS unit (Make/Model:) | | | |
| City, State, ZIP Code : Ellinwood, KS 67526 | | | | | Digital Map/Photo, Topographic Map, Land Survey | | | |
| Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m. ☐ >15 m | | | | | | | | |
| WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 80 ft. | | | | | | | | |
| į. | SECTION BOX: Depth(s) Groundwater Encountered (1) ft (2) ft (3) ft | | | | | | | |
| | N WELL'S STATIC WATER LEVEL 18 | | | | | | | |
| | Pump test data: Well water wasft. after hours pumping gpm | | | | | | | |
| 1 | DOT MICE MIA | | | | | | | |
| w N | 10 00 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | | | |
| | | | TO BE USED AS: | | | | | |
| - 57 | v | I I □ □ □ | | | | | Other (Specify below) | |
| | Irrigation Industrial Domestic lover & gordon Manitoring well | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? ☐ Yes ✓ No | | | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | | | |
| | 1 mile | Water well disin | fected? 🔽 Yes 🗌 N | lo | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | | | | | |
| CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | |
| Casing diameter .5 in. to .80 ft., Diameter ft., Diameter in. to ft. | | | | | | | | |
| Casing height above land surface. 18 in., Weight SDR-26 lbs./ft., Wall thickness or gauge No. | | | | | | | | |
| 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 80 ft. to 60 ft., From ft. to ft. | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | |
| From | | | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft., From 20 ft., From ft. to ft. | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | |
| Septic tank | | | | | | | | |
| Sewer lines | | | | | | | | |
| | Watertig | ht sewer lines Seepage p | it Feedyard | Fertilizer st | orage 🔲 Oil well/ga | as well None |) | |
| | | n well | | | | | | |
| FROM | TO | LITHOLOG | IC LOG | FROM | TO LITHO. L | OG (cont.) <u>or</u> PLU | IGGING INTERVALS | |
| 0 | 6 | Sandy top soil | | | | | | |
| 6 | 21 | Brown clay | | | | | | |
| 21 | 55 | Sandy brown clay | | | | | | |
| 55 | 80 | Sand & gravel | | | | | | |
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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) .6-25-15 and this record is true to the best of my knowledge and belief | | | | | | | | |
| Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/year) 7-1-15 | | | | | | | | |
| under the business name of Rosencrantz-Bemis Ent 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 | | | | | | | | |
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| http://www.kdheks.gov/waterwell/index.html | | | | | | | | |