38	10330	SW 1-10	Form W	WC 5	_				
WATER WELL RECORD 1 LOCATION OF WATER WELL:			Form WWC-5			Division of Water Resources App. No. Section Number Township No. Range Number			
County: Stafford			Fraction 1/4 SE 1/4 NE	E 1/4 SE 1/		on Number 36	T 21 S	Range Number R 13 ☐ E X W	
Street/Rural Address of Well Location; if unknown, distance & direction						l Positioning	System (GPS) inf		
from nearest town or intersection: If at owner's address, check here						Latitude: 38.177772 (in decimal degrees)			
Approximately 5 1/2 miles east of Seward						Longitude: -98.694724 (in decimal degrees)			
						ation:	unknown		
2 WATER WELL OWNER: Herman Fischer						Datum: ☐ WGS 84, ☒ NAD 83, ☐ NAD 27			
RR#, Street Address, Box #: 270 NE 150th St.						Collection Method: GPS unit (Make/Model: WAAS)			
City, State, ZIP Code : St. John, KS 67576						Digital Map/Photo, Topographic Map, Land Survey			
						Est. Accuracy:			
3LOCATEWELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 80 ft.									
SECTION BOX: Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. (3) WELL'S STATIC WATER LEVEL 17.25 ft. below land surface measured on mo/day/yr 5/14/10									
Pump test data: Well water was not checked ft. after hours pumping gpm									
N	NWNE EST. YIELD unknown gpm. Well water was ft. after hours pumping gpm								
$ \mathbf{w} ^{-1}$	W								
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well									
SW SE x									
	Irrigation Industrial Domestic-lawn & garden Monitoring well Stock Well								
Was a chemical/bacteriological sample submitted to Department? Yes No									
S If yes, mo/day/yr sample was submitted 1 mile Water well disinfected? Yes No									
5 TYPE OF CASING USED: Steel PVC Other									
CASING JOINTS: ☐ Clamped ☐ Welded ☐ Threaded									
Casing diameter 5 in to 63 ft., Diameter in to ft., Diameter in to ft.									
Casing diameter 5 in to 63 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 No214									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
Steel Stainless Steel PVC Other (Specify)									
Brass Galvanized Steel None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:									
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)									
From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 25 ft. to 80 ft., From ft. to ft.									
								to ft.	
From ft. to ft., From ft. to ft. 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From ft. to ft., From 0 ft. to 25 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 lin		Sewage lagoon	Fuel storag			xd water well	None known	
	Watertig ction fror	ht sewer lines 🔲 Seepage p n well	oit Feedyard	Fertilizer s Distance	_	☐ Oil well/g ell	as well		
FROM	TO	LITHOLOG	SICLOG	FROM	TO		OG (cont.) or PLU	GGING INTERVALS	
0	6	Topsoil					· · · · · · · · · · · · · · · · · · ·		
6	12	Clay, gray, hard							
12	33	Clay, light gray, sand							
33	42	Sand, coarse to very	fine, loose, with						
		clay streaks, green							
42	53	Clay, green and brow							
53	78	Sand, coarse to fine,	loose, with gravel,						
70	90	fine to medium		-		-			
78	80	Clay, tan, hard		 					
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) 5/14/10 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) 5/18/10									
under the business name of Clarke Well & Equipment, Inc. by (signature) Well & Equipment, Inc. Instructions: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies									
INSTRU	CTIONS:	Use typewriter or ball poin	t pen. PLEASE PRESS FIRML	Yand <u>PRINT</u> cl	early. Ple	ase fill in blanks	s and check the correct	t answers. Send three copies	
Telenhor	ue, pink) t ne 785-296	o Kansas Department of Health -5522. Send one copy to WA	TER WELL OWNER and	retain one for	жиду Sect your reco	nds. Include f	ee of \$5.00 for each o	onstructed well. Visit us at	
http://www.kdheks.gov/waterwell/index.html.									
KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy									