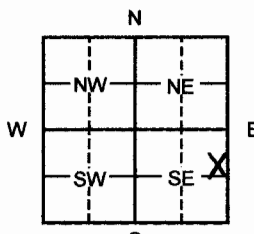


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. **21,612**

1 LOCATION OF WATER WELL: County: Finney		Fraction SE ¼ NE ¼ SE ¼		Section Number 20	Township Number 22 22 S	Range Number R 32 E/W
Distance and direction from nearest town or city street address of well if located within city? From Garden City, approx. 11 mi. North.				Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>38.12428</u> Longitude: <u>100.84859</u> Elevation: _____ Datum: _____ Data Collection Method: GPS		
2 WATER WELL OWNER: Larry Goss RR#, St. Address, Box # : 706 Fleming City, State, ZIP Code : Garden City, Ks, 67846						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL 247 ft.					
	Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <u>159</u> ft. below land surface measured on mo/day/yr <u>2/23/2009</u> Pump test data: Well water was <u>220</u> ft. after <u>4</u> hours pumping <u>80</u> gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <input checked="" type="checkbox"/> Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well					
	Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>x</u> ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes <u>x</u> No _____					
5 TYPE OF CASING USED:		5 Wrought Iron		8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____
<input checked="" type="checkbox"/> Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____ <input type="checkbox"/> PVC 4 ABS 7 Fiberglass _____ Threaded _____						
Blank casing diameter <u>16</u> in. to <u>247</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height above land surface <u>12</u> in., Weight <u>42</u> lbs./ft. Wall thickness or gauge No. <u>.250</u>				
TYPE OF SCREEN OR PERFORATION MATERIAL:						
<input checked="" type="checkbox"/> Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) _____ <input type="checkbox"/> Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)						
SCREEN OR PERFORATION OPENINGS ARE:						
<input checked="" type="checkbox"/> Continuous slot 3 Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) <input type="checkbox"/> Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____						
SCREEN-PERFORATED INTERVALS: From <u>155</u> ft. to <u>165</u> ft. From <u>192</u> ft. to <u>232</u> ft.						
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>247</u> ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other _____						
Grout Intervals From <u>0</u> ft. to <u>20</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.						
What is the nearest source of possible contamination: None Observed						
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well						
Direction from well? _____ How many feet? _____						
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS
0	2	Topsoil				
2	47	Brown Clay				
47	62	Fine Sand, Brown Clay Mix				
62	72	Sticky Brown Clay				
72	86	Soft Blue Clay				
86	107	Brown Clay, Sand Streaks				
107	126	Coarse Sand, Gravel, Few Clay Streaks				
126	132	Brown Clay, Coarse Sand Mix				
132	156	Coarse Sand, Gravel, White Rock				
156	160	Brown Clay				
160	165	Coarse Sand				
165	192	Light Yellow Soapstone, White Rock				
192	222	Medium Coarse Sand, Yellow Soapstone				
222	232	Medium Sand, Yellow Soapstone Mix				
232	240	Yellow Soapstone				
240	247	Black Shale				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> constructed, <input type="radio"/> reconstructed, or <input type="radio"/> plugged						

under my jurisdiction and was completed on (mo/day/year) 2/19/2009 and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 145. This Water Well Record was completed on (mo/day/year) 3/10/2009
under the business name of Henkle Drilling & Supply Co., Inc. by (signature) Brent Reichmuth.

INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies 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. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell>.