WATER WELL RECORD — Form WWC-5

Division of Water Resources App. No. ____

1 LOCATION OF WATER WELL: County: Finney County

Fraction: ¼ NW ¼ NW ¼ NW ¼

Section Number: 36 | Township No.: T 22 S | Range Number: R 34 ☐E ☑W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☑.

9 Mile Rd. & IBP Rd.

Global Positioning System (GPS) information:
Latitude: ..... (in decimal degrees)
Longitude: ..... (in decimal degrees)
Elevation: .....
Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27
Collection Method:
☐ GPS unit (Make/Model: .....)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: Chris Rome
RR#, Street Address, Box #: 10510 N. IBP Rd.
City, State, ZIP Code : Holcomb, KS 67851

3 LOCATE WELL WITH AN "X" IN SECTION BOX:

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

4 DEPTH OF COMPLETED WELL 235 ft.
Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL 180 ft. below land surface measured on mo/day/yr.....
Pump test data: Well water was 192 ft. after 4 hours pumping 48 gpm
EST. YIELD 75 gpm. Well water was..... ft. after..... hours pumping..... gpm
Bore Hole Diameter 10 in. to 235 ft., and ..... in. to ..... ft.
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 .....
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 5 in. to 235 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 18 in., Weight 200 lbs./ft., Wall thickness or gauge No. SDR21
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 195 ft. to 235 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 25 ft. to 145 ft., From 165 ft. to 235 ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other .....
Grout Intervals: From 5 ft. to 25 ft., From 145 ft. to 165 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 .....
Direction from well South Distance from well 250'

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Top Soil	174	185	Coarse Sand, Small Gravel
2	25	Brown Clay	185	195	Brown Clay
25	65	Brown Clay, Few Sand Streaks	195	233	Medium to Coarse Sand, Some Small
65	105	Brown Clay, Gypsum Streaks			Gravel, White Broken Rock
105	134	Brown Clay	233	235	Yellow Soapstone
134	145	Coarse Sand, Small Gravel Few Brown			
		Clay Streaks			
145	166	Brown Clay			
166	168	Coarse Sand, Small Gravel			
168	174	Brown Clay			

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) 7-19-12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 532 This Water Well Record was completed on (mo/day/year) 8-12-12 under the business name of Midwest Well & Pump Inc. by (signature) [signature]

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 (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 785-296-5524. 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 http://www.kdheks.gov/waterwell/index.html.

KSA 82a-1212 Check: ☒ White Copy, ☐ Blue Copy, ☐ Pink Copy