

**WATER WELL RECORD****Form WWC-5**☒ Original Record ☐ Correction ☐ Change in Well UseDivision of Water  
Resources App. No.

49,755

Well ID Stock

**1 LOCATION OF WATER WELL:**

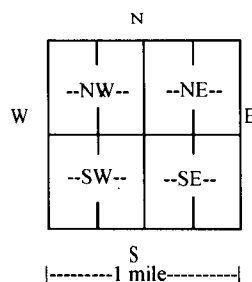
County: Reno

Fraction  
NW ¼ NW ¼ SE ¼ NW ¼Section Number  
5Township Number  
T 22 SRange Number  
R 6 ☐ E ☒ W**2 WELL OWNER:** Last Name: Hoffman

First: Matt

Business:  
Address: 3507 E. 82nd Ave.Address:  
City: Hutchinson

State: KS ZIP: 67502

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 1.50 miles north and 4 miles east of Nickerson.**3 LOCATE WELL WITH "X" IN SECTION BOX:****4 DEPTH OF COMPLETED WELL:**

46 ft.

Depth(s) Groundwater Encountered: 1) ft.

2) ft. 3) ft. or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL: 5.60 ft.

☒ below land surface, measured on (mo-day-yr) 03-05-20☐ above land surface, measured on (mo-day-yr)

Pump test data: Well water was not checked ft.

after hours pumping gpm

Well water was ft.

after hours pumping gpm

Estimated Yield: gpm

Bore Hole Diameter: 9 in. to 50 ft. and in. to ft.

**5 Latitude:** 38.169531

(decimal degrees)

**Longitude:** -98.009042

(decimal degrees)

Horizontal 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:** Unknownft. ☐ Ground Level ☐ TOCSource: ☐ Land Survey ☐ GPS ☐ Topographic Map☐ Other**7 WELL WATER TO BE USED AS:**

1. Domestic:

☐ Household☐ Lawn & Garden☒ Livestock2. ☐ Irrigation3. ☐ Feedlot4. ☐ Industrial5. ☐ Public Water Supply: well ID6. ☐ Dewatering: how many wells?7. ☐ Aquifer Recharge: well ID8. ☐ Monitoring: well ID

9. Environmental Remediation: well ID

☐ Air Sparge☐ Soil Vapor Extraction☐ Recovery☐ Injection10. ☐ Oil Field Water Supply: lease

11. Test Hole: well ID

☐ Cased ☐ Uncased ☐ Geotechnical

12. Geothermal: how many bores?

a) Closed Loop ☐ Horizontal ☐ Verticalb) Open Loop ☐ Surface Discharge ☐ Inj. of Water13. ☐ 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 ☒ PVCCASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded ☐ Other

Casing diameter 5 in. to 34 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. .215

**TYPE OF SCREEN OR PERFORATION MATERIAL:**☐ Steel☐ Stainless Steel☐ Fiberglass☒ PVC☐ Other (Specify)☐ Brass☐ Galvanized Steel☐ Concrete tile☐ 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 34 ft. to 44 ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 20 ft. to 50 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:**☐ 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) None Known

Direction from well?

Distance from well?

ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	5	Topsoil			
5	9	Clay, brown			
9	12	Clay, brownish yellow			
12	17	Sand, very fine to fine			
17	45	Sand & gravel, coarse to fine			
45	50	Shale, red			

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) 03-05-20 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) 03-09-20

under the business name of Clarke Well &amp; Equipment, Inc.

Signature

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.

Visit us at <http://www.kdheks.izov/waterwell/index.html>

KSA 82a-1212

Revised 7/10/2015