| XX7 A (EDED) | D XX/DI | I DECORD | E WW. | . = | 5 1 6 33 | | 30,788 | |
|---|---|---|-------------------------|------------|---|---------------------------------|------------------------------|--|
| | | LL RECORD | Form WWC | 3 | | Resources App. No | | |
| | | OF WATER WELL: | Fraction | NE 1/ | Section Number 29 | Township No. T 23 S | Range Number | |
| | ounty: Reno | | | | | | R 6 E W | |
| | | | | | Global Positioning System (GPS) information: Latitude: | | | |
| 1 | from nearest town or intersection: If at owner's address, check here | | | | Longitude: (in decimal degrees) | | | |
| 2 3/ | 2 3/4 West of South Hutchinson | | | | | Elevation: (in decimal degrees) | | |
| | | | | | Datum: WGS 84, NAD 83, NAD 27 | | | |
| 2 WATER WELL OWNER: Enterprise Products Operating | | | | | Collection Method: | | | |
| RR#, Street Address, Box #: 2610 Mohawk Road | | | | | GPS unit (Make/Model:) | | | |
| City, State, ZIP Code : Hutchinson, Ks. 67501 | | | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | |
| Est. Accuracy: | | | | | | | 5-15 m, <u></u> >15 m | |
| | 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 189 ft. | | | | | | | |
| | | BOX: Depth(s) Groundwater Encountered (1) | | | | | | |
| SEC | TION BOX: Depth(s) Groundwater Encountered (1) | | | | | | | |
| | Pump test data: Well water was | | | | | | | |
| | EST VIELD com Well victor vice ft offer hours numering | | | | | | | |
| w N\ | Bore Hole Diameter 30 in to 189 ft and in to ft | | | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | |
| Domostic Deadlet Oil field water supply Developing Other (Specify below) | | | | | | | | |
| SW SE | | | | | | | | |
| | Was a chemical/bacteriological sample submitted to Department? ☐ Yes ✓ No | | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | | | |
| mile Water well disinfected? ✓ Yes ☐ No | | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | | | | | |
| CASING JOINTS: M Glued Clamped Welded Threaded | | | | | | | | |
| Casing diameter .16 | | | | | | | | |
| Casing diameter 1.0 In. to 1.09 It., Diameter III. to | | | | | | | | |
| 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 | | | | | | | | |
| | CD AT | EL DACK DITEDUALC | From | 50 | ft., From | It. 1 | to ft. | |
| GRAVEL PACK INTERVALS: From 189 ft. to 50 ft., From ft. to ft. | | | | | | | | |
| From | | | | | | | | |
| Grout Intervals: From 37 | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | |
| □ Septic tank □ Lateral lines □ Pit privy □ Livestock pens □ Insecticide storage ☑ Other (specify below) | | | | | | | | |
| Sewer lines | | | | | | | | |
| ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well Brine Pond | | | | | | | | |
| Direction from well East Distance from well 50ft | | | | | | | | |
| FROM | ТО | LITHOLOG | IC LOG F | ROM | TO LITHO. LO | OG (cont.) <u>or</u> PLU | IGGING INTERVALS | |
| 0 | 3 | Top soil | | | | | | |
| 3 | 40 | Tan clay | | | | | | |
| 40 | 55 | Sandy tan clay | | | | | | |
| 55 | 70 | Med to fine sand | | | | | | |
| 70 | 72 | Tan clay | | | | | | |
| 72 | 187 | Med to fine sand | | | | | | |
| 187 | 189 | Shale | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 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) .3/26/12 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) 5/2/12 | | | | | | | | |
| under the business name of Rossencrantz- Bemis by (signature) by (signature) in STRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies | | | | | | | | |
| INSTRUC | CTIONS: | Use ty pewriter or ball point pen. | PLEASE PRESS FIRMLY and | PRINT clea | irly. Please fill in blanks | and check the correct | t answers. Send three copies | |
| (white, blue, pink) to Kansas Depar tment of Health and E nvironment, 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. Vi sit us at | | | | | | | | |
| http://www.kdheks.gov/waterwell/index.html. | | | | | | | | |
| KSA 82a-1212 Check: ✓ White Copy, ☐ Blue Copy, ☐ Pink Copy | | | | | | | | |