

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <b>Reno</b>		<b>NW ¼ SW ¼ SW ¼</b>		<b>22</b>		<b>T 23 S</b>		<b>R 6 W</b>	
Distance and direction from nearest town or city street address of well if located within city? <b>1910 S. Broadacres Rd. - Hutchinson</b>									
2 WATER WELL OWNER: <b>Glenn Springs Holdings, Inc.</b>									
RR#, St. Address, Box #: <b>5005 LBJ Freeway, Ste. 1350</b>					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code: <b>Dallas, TX 75244</b>					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <b>37</b> ft. ELEVATION:							
		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.							
		WELL'S STATIC WATER LEVEL <b>29.44</b> ft. below TOC measured on mo/day/yr <b>03/27/14</b>							
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
		Bore Hole Diameter <b>8.25</b> in. to <b>37</b> ft. and _____ in. to _____ ft.							
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)									
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) <b>10 Monitoring well</b>									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>X</b> If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes _____ No <b>X</b>									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____									
2 <b>PVC</b> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____									
7 Fiberglass _____ Threaded _____ Flush _____									
Blank casing diameter <b>2</b> in. to <b>17</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface <b>36</b> in., weight <b>0.703</b> lbs./ft. Wall thickness or gauge No. <b>SCH. 40</b>									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 3 <b>Mill slot</b> 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
2 Louvered shutter 4 Key punched 7 Torch cut 9 Drilled holes 10 Other (specify) _____									
SCREEN-PERFORATED INTERVALS: From <b>17</b> ft. to <b>37</b> ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From <b>14.5</b> ft. to <b>37</b> ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <b>Bentonite</b> 4 Other _____									
Grout intervals From <b>2</b> ft. to <b>14.5</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:									
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
13 Insecticide storage									
Direction from well? _____ How many feet? _____									
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS			
0	8		<b>Lithology not logged</b>						
8	13	<b>ML</b>	<b>Silt, dark brown, some clay</b>						
13	21.5	<b>SP</b>	<b>Sand, light brown to red brown, very fine to medium grained, some silt and clay</b>						
21.5	24	<b>ML</b>	<b>Silt, red brown to gray, some clay, some fine to medium sand</b>						
24	28	<b>SP</b>	<b>Sand, red brown to gray, fine to medium, then medium to coarse grained</b>						
28	37	<b>SW</b>	<b>Sand, gray, fine to coarse grained</b>						
						<b>GPS:</b>			
						<b>Latitude: N 38.03087</b>			
						<b>Longitude: W 97.97555</b>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1) constructed</b> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) <b>03/27/14</b> and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. <b>531</b>					This Water Well Record was completed on (mo/day/yr) <b>04/21/14</b>				
under the business name of <b>GSI Engineering, LLC</b>					by (signature) <i>[Signature]</i>				
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									

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