

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

24278

Well ID

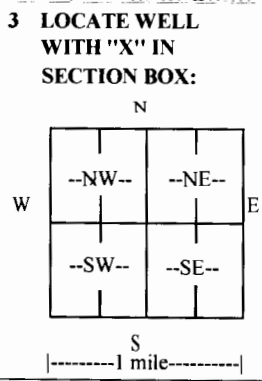
Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL: County: Stafford	Fraction NE ¼ NE ¼ SW ¼ NW ¼	Section Number 28	Township Number T 24 S	Range Number R 14 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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2 WELL OWNER: Last Name: Granger First: Barry

Business Address: 433 SE Stanford Pl.
Address:
City: College Place State: WA ZIP: 99324

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 1.5 miles south and 5 miles east of Macksville.



4 DEPTH OF COMPLETED WELL: 105 ft.

Depth(s) Groundwater Encountered: 1) _____ ft.
2) _____ ft. 3) _____ ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL: 28.70 ft.

below land surface, measured on (mo-day-yr) 04-10-18
 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: 24 in. to 105 ft. and _____ in. to _____ ft.

5 Latitude: 37.937997 (decimal degrees)
Longitude: -98.871314 (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: Unknown ft. Ground Level TOC
Source: Land Survey GPS Topographic Map
 Other

7 WELL WATER TO BE USED AS:

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	2. <input checked="" type="checkbox"/> Irrigation	3. <input type="checkbox"/> Feedlot	4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID	6. <input type="checkbox"/> Dewatering: how many wells?	7. <input type="checkbox"/> Aquifer Recharge: well ID	8. <input type="checkbox"/> Monitoring: well ID	9. Environmental Remediation: well ID <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease	11. Test Hole: well ID <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical	12. Geothermal: how many bores? a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water	13. <input type="checkbox"/> Other (specify): _____
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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 PVC CASING JOINTS: Glued Clamped Welded Threaded Other

Casing diameter 16 in. to 70 ft., Diameter 16 in. to 98 ft., Diameter _____ in. to _____ ft.
Casing height above land surface 12 in. Weight 19.75 lbs./ft. Wall thickness or gauge No. .616

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 70 ft. to 84 ft., From 98 ft. to 104 ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 22 ft. to 105 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From 2 ft. to 22 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	3	Topsoil	75	84	Sand & gravel, fine to coarse
3	16	Clay, brown, gray	84	100	Clay, gray, caliche, white clay
16	30	Clay, brown, white, caliche	100	104	Sand & gravel, fine to medium, clay streaks
30	45	Sand & gravel, fine to coarse	104	105	Clay
45	52	Sand & gravel, fine to medium			
52	55	Clay, gray & white			
55	61	Sand & gravel, fine to medium			
61	65	Sand & gravel, fine to very fine			
65	75	Sand & gravel, fine to medium, yellow clay streaks			

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) 04-10-18 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) 04-13-18
under the business name of Clarke Well & Equipment, Inc. Signature _____