

**WATER WELL RECORD Form WWC-5**

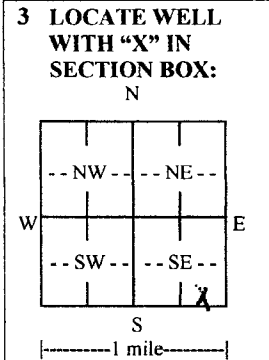
Original Record  Correction  Change in Well Use

Division of Water Resources App. No.  

Well ID  

|  |                              |                             |                                  |  |
|--|------------------------------|-----------------------------|----------------------------------|--|
| <b>1 LOCATION OF WATER WELL:</b><br>County: <b>Edwards</b> | Fraction<br>¼ SW ¼ SE ¼ SE ¼ | Section Number<br><b>25</b> | Township Number<br>T <b>24</b> S | Range Number<br>R <b>20</b> <input type="checkbox"/> E <input checked="" type="checkbox"/> W |
|--|------------------------------|-----------------------------|----------------------------------|--|

|  |   |
|--|---|
| <b>2 WELL OWNER:</b> Last Name: <b>Habiger</b> First: <b>James</b><br>Business Address: <b>1167 70th Avenue</b><br>Address:<br>City: <b>Kinsley</b> State: <b>KS</b> ZIP: <b>67547</b> | 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: <input type="checkbox"/><br><b>2 1/4 West of Kinsley</b> |
|--|---|



**4 DEPTH OF COMPLETED WELL:** ..... **135** ..... ft.

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

WELL'S STATIC WATER LEVEL: ..... **39** ..... ft.

below land surface, measured on (mo-day-yr) ..... **10-4-18** .....  
 above land surface, measured on (mo-day-yr) .....

Pump test data: Well water was ..... ft.  
after ..... hours pumping ..... gpm  
Well water was ..... ft.  
after ..... hours pumping ..... gpm

Estimated Yield: ..... gpm  
Bore Hole Diameter: ..... **10** ..... in. to ..... **135** ..... ft. and  
..... in. to ..... ft.

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

**7 WELL WATER TO BE USED AS:**

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

Casing diameter ..... **5** ..... in. to ..... **135** ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.

Casing height above land surface ..... **18** ..... in. Weight ..... **SDR-26** lbs./ft. Wall thickness or gauge No. ....

**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 ..... **135** ..... ft. to ..... **105** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**GRAVEL PACK INTERVALS:** From ..... **135** ..... ft. to ..... **20** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....

Grout Intervals: From ..... ft. to ..... ft., From ..... **20** ..... ft. to ..... **0** ..... ft., From ..... ft. to ..... ft.

**Nearest source of possible contamination:**

|   |  |  |  |   |
|---|--|--|--|---|
| <input type="checkbox"/> Septic Tank            | <input type="checkbox"/> Lateral Lines | <input type="checkbox"/> Pit Privy     | <input checked="" type="checkbox"/> Livestock Pens | <input type="checkbox"/> Insecticide Storage  |
| <input type="checkbox"/> Sewer Lines            | <input type="checkbox"/> Cess Pool     | <input type="checkbox"/> Sewage Lagoon | <input type="checkbox"/> Fuel Storage              | <input type="checkbox"/> Abandoned Water Well |
| <input type="checkbox"/> Watertight Sewer Lines | <input type="checkbox"/> Seepage Pit   | <input type="checkbox"/> Feedyard      | <input type="checkbox"/> Fertilizer Storage        | <input type="checkbox"/> Oil Well/Gas Well    |
| <input type="checkbox"/> Other (Specify) .....  |  |  |  |   |

Direction from well? ..... **North** ..... Distance from well? ..... **170ft** ..... ft.

| 10 FROM | TO  | LITHOLOGIC LOG                      | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|---------|-----|-------------------------------------|------|----|--|
| 0       | 3   | Top soil                            |      |    |  |
| 3       | 112 | Tan & brown clay                    |      |    |  |
| 112     | 118 | Sand & gravel- clean                |      |    |  |
| 118     | 135 | Brown clay w/ sand & gravel 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) ..... **10-4-18** ..... 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) ..... **10-22-18** ..... under the business name of ... **Rosencrantz- Bemis Ent Inc** ..... Signature ..... *Aron A. A. A.* .....