

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction NW ¼ NW ¼ NW ¼		Section Number 7	Township Number T 24 S	Range Number R 32 W																																				
County: Finney				Global Positioning System (decimal degrees, min. of 4 digits)																																						
Distance and direction from nearest town or city street address of well if located within city? 2522 N Hwy 83, Garden City				Latitude: N 37.98966°																																						
				Longitude: W 100.88290°																																						
2 WATER WELL OWNER: Presto Convenience Stores LLC (Presto #23)				Elevation: RIM: 2843.34																																						
RR#, St. Address, Box # : PO Box 609				TOC: 2843.07																																						
City, State, ZIP Code : Andover, KS 67002-0609				Datum: above mean sea level																																						
				Data Collection Method: legal survey																																						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>25.0</u> ft.																																								
<div style="text-align: center;"> </div>		MW4																																								
		Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft.																																								
		WELL'S STATIC WATER LEVEL <u>17.09</u> ft. below land surface measured on mo/day/yr <u>8/7/08</u>																																								
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm																																								
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm																																								
		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 Domestic (lawn & garden) <u>10</u> Monitoring well																																								
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr																																								
		Sample was submitted _____ Water Well Disinfected? Yes _____ No <u>X</u>																																								
5 TYPE OF CASING USED:																																										
1 Steel		3 RMP (SR)		6 Asbestos-Cement		8 Concrete tile																																				
<u>2</u> PVC		4 ABS		7 Fiberglass		CASING JOINTS: Glued _____ Clamped _____																																				
						Welded _____																																				
						Threaded <u>X</u>																																				
Blank casing diameter <u>2</u> in. to <u>10.0</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.																																										
Casing height below land surface <u>0.27</u> ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____																																										
TYPE OF SCREEN OR PERFORATION MATERIAL:																																										
1 Steel		3 Stainless steel		5 Fiberglass		<u>7</u> PVC																																				
2 Brass		4 Galvanized steel		6 Concrete tile		8 RM (SR)																																				
						9 ABS																																				
						11 Other (specify) _____																																				
SCREEN OR PERFORATION OPENINGS ARE:																																										
1 Continuous slot		<u>3</u> Mill slot		5 Guaze wrapped		7 Torch cut																																				
2 Louvered shutter		4 Key punched		6 Wire wrapped		8 Saw Cut																																				
						9 Drilled holes																																				
						11 None (open hole)																																				
SCREEN-PERFORATED INTERVALS: From <u>10.0</u> ft. to <u>25.0</u> ft. From _____ ft. to _____ ft.																																										
GRAVEL PACK INTERVALS: From <u>9</u> ft. to <u>25.0</u> ft. From _____ ft. to _____ ft.																																										
FROM _____ ft. to _____ ft. FROM _____ ft. to _____ ft.																																										
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3</u> Bentonite <u>4</u> Other Concrete: 0-2 ft																																										
Grout Intervals From <u>2</u> ft. to <u>9.0</u> 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																																				
2 Sewer lines		5 Cess pool		8 Sewage lagoon		<u>11</u> Fuel storage																																				
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage																																				
						13 Insecticide Storage																																				
						14 Abandoned water well																																				
						15 Oil well/ gas well																																				
						16 Other (specify below) _____																																				
Direction from well? South How many feet? <u>~135 ft</u>																																										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>1</td> <td>Asphalt</td> <td>23</td> <td>25</td> <td>Sand, fine grained, light brown, some clay, very moist, no odor</td> </tr> <tr> <td>8</td> <td>10</td> <td>Sand, coarse grained, poorly sorted, tan, slightly moist, no odor</td> <td></td> <td></td> <td></td> </tr> <tr> <td>12</td> <td>14</td> <td>Sand, coarse grained, poorly sorted, tan, slightly moist, no odor</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td>17</td> <td>Sand, coarse grained, poorly sorted, little fine gravel, tan, slightly moist, no odor</td> <td></td> <td></td> <td></td> </tr> <tr> <td>18</td> <td>20</td> <td>Sand, fine grained, light brown, some clay, very moist, no odor</td> <td></td> <td></td> <td>Flushmount waiver from BOW</td> </tr> </tbody> </table>							FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0	1	Asphalt	23	25	Sand, fine grained, light brown, some clay, very moist, no odor	8	10	Sand, coarse grained, poorly sorted, tan, slightly moist, no odor				12	14	Sand, coarse grained, poorly sorted, tan, slightly moist, no odor				15	17	Sand, coarse grained, poorly sorted, little fine gravel, tan, slightly moist, no odor				18	20	Sand, fine grained, light brown, some clay, very moist, no odor			Flushmount waiver from BOW
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, <u>(2)</u> reconstructed, or <u>(3)</u> plugged under my jurisdiction and was completed on (mo/day/year) <u>8/7/08</u> and this record is true to the best of my knowledge and belief.																																										
Kansas Water Well Contractor's License No. <u>757</u> . This Water Well Record was completed on (mo/day/year) <u>9/2/08</u>																																										
under the business name of Larsen & Associates, Inc. by (signature) _____																																										
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell .																																										