

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Finney</u>		Fraction <u>NW 1/4 SW 1/4 NE 1/4</u>	Section Number <u>18</u>	Township Number <u>T 24 S</u>	Range Number <u>R 33 E(W)</u>																				
Distance and direction from nearest town or city street address of well if located within city?			Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																						
2 WATER WELL OWNER: <u>Sunflower Electric Corp</u> RR#, St. Address, Box # : <u>Box 1020</u> City, State, ZIP Code : <u>Hays, KS. 67601-1020</u>																									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"><tr><td>W</td><td> </td><td> </td><td> </td><td>E</td></tr><tr><td> </td><td>-- NW --</td><td>X</td><td>-- NE --</td><td> </td></tr><tr><td> </td><td>-- SW --</td><td> </td><td>-- SE --</td><td> </td></tr><tr><td> </td><td>S</td><td> </td><td> </td><td> </td></tr></table>		W				E		-- NW --	X	-- NE --			-- SW --		-- SE --			S				4 DEPTH OF COMPLETED WELL <u>316</u> ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... <u>102</u> ft. below land surface measured on mo/day/yr. <u>9-13-06</u> . Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield. <u>100</u> 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 Feedlot 6 Oil field water supply 9 Dewatering <input checked="" type="checkbox"/> Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well <u>stock</u> Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No			
W				E																					
	-- NW --	X	-- NE --																						
	-- SW --		-- SE --																						
	S																								
5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) <input checked="" type="checkbox"/> PVC 4 ABS 7 Fiberglass Blank casing diameter <u>10</u> in. to <u>316</u> ft., Diameter. in. to ft., Diameter in. to ft. Casing height above land surface..... <u>12</u> in., Weight.....lbs./ft. Wall thickness or gauge No. <u>200 p.s.i.</u> TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="checkbox"/> PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped <input checked="" type="checkbox"/> Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From..... <u>276</u> ft. to <u>316</u> ft., From ft. to ft. GRAVEL PACK INTERVALS: From..... <u>44</u> ft. to <u>258</u> ft., From ft. to ft. From..... <u>262</u> ft. to <u>316</u> ft., From ft. to ft.																									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other Grout Intervals: From <u>0</u> ft. to <u>44</u> ft., From <u>258</u> ft. to <u>262</u> ft., From ft. to ft. What is the nearest source of possible contamination: <u>none</u> 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well Direction from well? How many feet?																									
FROM		TO		LITHOLOGIC LOG																					
0		2		top soil																					
2		34		coarse gravel, pea size																					
34		42		brown clay																					
42		162		blue clay																					
162		204		blue clay, brown clay sand, small gravel																					
204		222		coarse sand, small gravel, clean, loose																					
222		233		coarse sand, small gravel, br. clay mixed																					
233		236		brown clay																					
236		244		med. to coarse sand, clean, loose																					
244		248		brown clay																					
FROM		TO		PLUGGING INTERVALS																					
248		258		med to coarse sand, brown clay, cemented sand, mixed																					
258		264		brown clay																					
264		272		med. to coarse sand																					
272		278		med. to coarse sand, brown clay sks																					
278		282		brown clay																					
282		312		med. to coarse sand, few clay sks																					
312		316		coarse sand, small gravel, broken rock, brown clay streaks																					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ... <u>9-13-06</u> .. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>532</u> This Water Well Record was completed on (mo/day/year) ... <u>9-14-06</u> under the business name of <u>Midwest Well & Pump Inc</u> by (signature) <u>Kelvin Subup</u> INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline 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 <u>constructed</u> well. Visit us at http://www.kdhe.state.ks.us/geo/waterwells .																									