

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. 19734

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|---|------------|--|-------------|--|-----------------------------|--|------------------------------|--|
| 1 LOCATION OF WATER WELL: | | Fraction | | Section Number | Township Number | | Range Number | |
| County: <u>Gray</u> | | <u>¼</u> <u>NC</u> <u>¼</u> <u>SW</u> <u>¼</u> | | <u>34</u> | <u>T</u> <u>25</u> <u>S</u> | | <u>R</u> <u>30</u> <u>EW</u> | |
| Distance and direction from nearest town or city street address of well if located within city? From Charleston, appx 2 miles south & 2 miles West | | | | Global Positioning System (decimal degrees, min. of 4 digits) | | | | |
| | | | | Latitude: <u>37.84004</u> | | | | |
| | | | | Longitude: <u>100.60642</u> | | | | |
| | | | | Elevation: <u>2750</u> | | | | |
| | | | | Datum: _____ | | | | |
| | | | | Data Collection Method: _____ | | | | |
| 2 WATER WELL OWNER: <u>Dan Miller / Carl Miller Trust</u> | | | | | | | | |
| RR#, St. Address, Box # : <u>PO Box 668</u> | | | | | | | | |
| City, State, ZIP Code : <u>Cimarron KS 67835</u> | | | | | | | | |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | 4 DEPTH OF COMPLETED WELL <u>237</u> ft. | | | | | | |
| <div style="text-align: center;"> </div> | | Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. | | | | | | |
| | | WELL'S STATIC WATER LEVEL <u>90</u> ft. below land surface measured on mo/day/yr <u>7/25/08</u> | | | | | | |
| | | Pump test data: Well water was _____ ft. after <u>4</u> hours pumping _____ gpm | | | | | | |
| | | Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm | | | | | | |
| | | WELL WATER TO BE USED AS: <u>5</u> _____ 8 Air conditioning 11 Injection well | | | | | | |
| | | 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) | | | | | | |
| | | <u>2</u> Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 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 <u>x</u> No _____ | | | | | | |
| 5 TYPE OF CASING USED: | | 5 Wrought Iron _____ 8 Concrete tile _____ CASING JOINTS: Glued _____ Clamped _____ | | | | | | |
| <u>1</u> Steel _____ 3 RMP (SR) _____ 6 Asbestos-Cement _____ 9 Other (specify below) _____ Welded <u>X</u> | | | | | | | | |
| <u>2</u> PVC _____ 4 ABS _____ 7 Fiberglass _____ Threaded _____ | | | | | | | | |
| Blank casing diameter <u>16</u> in. to <u>237</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. | | | | | | | | |
| Casing height above land surface <u>12</u> in., Weight <u>42</u> lbs./ft. Wall thickness or gauge No. <u>.250</u> | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | |
| <u>1</u> Steel _____ 3 Stainless steel _____ 5 Fiberglass _____ 7 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: | | | | | | | | |
| <u>1</u> Continuous slot _____ 3 Mill slot _____ 5 Gauge wrapped _____ 7 Torch cut _____ 9 Drilled holes _____ 11 None (open hole) _____ | | | | | | | | |
| 2 Louvered shutter _____ 4 Key punched _____ 6 Wire wrapped _____ 8 Saw Cut _____ 10 Other (specify) _____ | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: | | | | | | | | |
| From <u>117</u> ft. to <u>177</u> ft. From <u>207</u> ft. to <u>227</u> ft. | | | | | | | | |
| GRAVEL PACK INTERVALS: | | | | | | | | |
| From <u>20</u> ft. to <u>237</u> ft. From _____ ft. to _____ ft. | | | | | | | | |
| From _____ ft. to _____ ft. From _____ ft. to _____ ft. | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement _____ 2 Cement grout _____ 3 Bentonite _____ 4 Other _____ | | | | | | | | |
| Grout Intervals From <u>0</u> ft. to <u>20</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 _____ 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? <u>South east</u> How many feet? <u>175</u> | | | | | | | | |
| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS | | | |
| <u>0</u> | <u>1</u> | Blow Sand | | | | | | |
| <u>1</u> | <u>71</u> | Sand fine to med course small to med gravel | | | | | | |
| <u>71</u> | <u>90</u> | Clay, Lime rock | | | | | | |
| <u>90</u> | <u>120</u> | Sand fine to med course small gravel | | | | | | |
| <u>120</u> | <u>138</u> | Sand fine to med course | | | | | | |
| <u>138</u> | <u>143</u> | clay | | | | | | |
| <u>143</u> | <u>151</u> | Sand fine | | | | | | |
| <u>151</u> | <u>177</u> | Sand fine to small few med | | | | | | |
| <u>177</u> | <u>204</u> | Clay few sand | | | | | | |
| <u>204</u> | <u>218</u> | Clay fine sand tight | | | | | | |
| <u>218</u> | <u>227</u> | Sand fine to med tight | | | | | | |
| <u>227</u> | <u>240</u> | soapstone | | | | | | |
| <u>240</u> | <u>250</u> | Shale | | | | | | |

White Copy

KSA 82a-1212

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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 04/24/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 145. This Water Well Record was completed on (mo/day/year) 05/29/08 under the business name of Henkle Drilling & Supply Co, 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>.