

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

RFI 2

1 LOCATION OF WATER WELL: County: FORD Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 600 East Trail Street, Dodge City, KS	Fraction SW 1/4 SE 1/4 SW 1/4 SW 1/4 Section Number 25 Township No. T 26 S Range Number R 25 <input type="checkbox"/> E <input checked="" type="checkbox"/> W	Global Positioning System (GPS) information: Latitude: 37.750926 (in decimal degrees) Longitude: 100.01142 (in decimal degrees) Elevation: _____ Datum: <input checked="" type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: iPhone 5C) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m
2 WATER WELL OWNER: Safety-Kleen Systems Inc. Brian Culnan RR#, Street Address, Box #: 1050 North 3rd Street, Suite M City, State, ZIP Code : Laramie, WY 82071 307-742-6150		

3 LOCATE WELL WITH AN "X" IN SECTION BOX: N <table style="width:100%; text-align: center; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> </table> W E S -----1 mile-----					4 DEPTH OF COMPLETED WELL <u>30</u> ft. Depth(s) Groundwater Encountered (1) <u>0</u> ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <u>0</u> ft. below land surface measured on mo/day/yr. <u>7-16-16</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm EST. YIELD _____ gpm. Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <u>6</u> in. to _____ ft., and _____ in. to _____ ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input checked="" type="checkbox"/> Monitoring well <u>RFI 2</u> Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted _____ Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

5 TYPE OF CASING USED: Steel PVC Other _____
CASING JOINTS: Glued Clamped Welded Threaded
 Casing diameter 2 in. to 15 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface 0 in., Weight 70 lbs./ft., Wall thickness or gauge No. SCH 40
TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel PVC Other (Specify) _____
 Brass Galvanized Steel None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
 Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify) _____
SCREEN-PERFORATED INTERVALS: From 30 ft. to 15 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 30 ft. to 13 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Intervals: From 9 ft. to 0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)
 Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well Unknown
 Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Concrete			
2	10	Clay			
10	30	Sand			

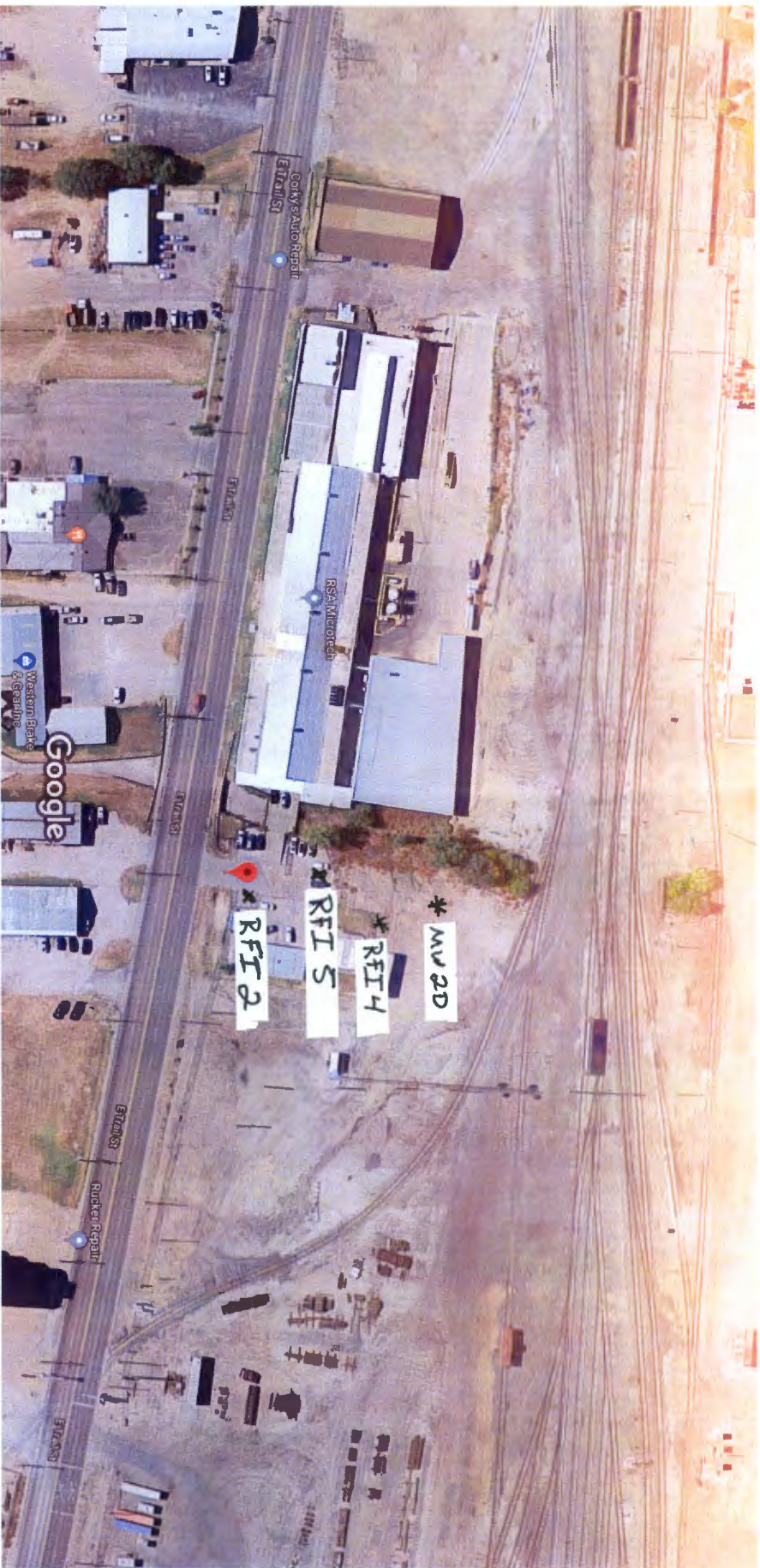
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 7-16-16 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 597 This Water Well Record was completed on (mo/day/year) _____
 under the business name of Cascade Drilling L.P. by (signature) _____

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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 copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

Google Maps

37°45'03.0"N 100°00'41.4"W

RECEIVED
MAR 30 2018
BUREAU OF WATER



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50 ft