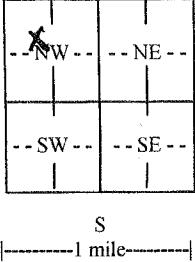


WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

20884

1 LOCATION OF WATER WELL: County: Gray		Fraction $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number 32	Township No. T 26 S	Range Number R 27 <input type="checkbox"/> E <input checked="" type="checkbox"/> W		
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"/> . 3 3/4 South, 2 East of Cimarron			Global Positioning System (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <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: Circle D Farms RR#, Street Address, Box #: P.O. Box 885 City, State, ZIP Code : Ulysses, Ks. 67880							
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N  E S 1 mile		4 DEPTH OF COMPLETED WELL 260 ft. Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL 126 ft. below land surface measured on mo/day/yr. 4-18-12 Pump test data: Well water was ft. after hours pumping gpm EST. YIELD. N/A gpm. Well water was ft. after hours pumping gpm Bore Hole Diameter 28 in. to 260 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 checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
5 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter .16 in. to 260 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface. 18 in., Weight Sch.40 lbs./ft., Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input checked="" type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From 260 ft. to 180 ft., From ft. to ft. to ft. From ft. to ft., From ft. to ft. to ft. GRAVEL PACK INTERVALS: From 260 ft. to 20 ft., From ft. to ft. to ft. From ft. to ft., From ft. to ft. to ft.							
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From ft. to ft., From 20 ft. to 0 ft., From ft. to ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input checked="" type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <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 None							
Direction from well			Distance from well				
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	
0	3	Top soil		137	141	Sand & gravel- coarse/ clay pieces	
3	18	Brown clay		141	156	Tan clay	
18	28	Sand		156	165	White clay	
28	34	Tan & white clay		165	180	Tan clay with sand streaks	
34	62	Sand & gravel- coarse		180	191	Sand & gravel- med, tight	
62	63	Tan clay		191	201	Tight sand w/ clay streaks	
63	90	Sand & gravel-coarse w/ clay pieces		201	211	Sand & gravel- small, tight	
90	106	Sand & gravel- small, tight		211	227	Tight sand/ small clay streaks	
106	133	Sand & gravel- med, coarse		227	245	Sand & gravel- small to med,tight	
133	137	Tan clay		245	260	Dark gray shale	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 4-18-12..... 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) 5-15-12..... under the business name of ..Rosenkrantz-Bemis..... by (signature) .. <i>Oscar Alegre</i>							
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 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. I include fee of \$5.00 for each <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html .							