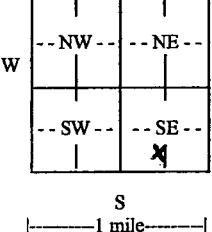


WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

28,476

1 LOCATION OF WATER WELL:			Fraction County: Gray <i>1/4 SE 1/4 SW 1/4 SE 1/4</i>	Section Number 4	Township No. T 26 S	Range Number R 28 <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"/> .			Global Positioning System (GPS) information: Latitude: 37.81079..... (in decimal degrees) Longitude: -100.38600..... (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input checked="" type="checkbox"/> NAD 27			
From the intersection of Hwy. 50 & Rd. 16; 1/10th of a mile North, 2/10ths NW			Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: Magel/Triton 300.....) <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:			Cimarron Feeders RR#, Street Address, Box #: 13745 Rd. 16 City, State, ZIP Code : Cimarron, KS 67853			
3 LOCATE WELL WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL 237..... ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 122..... ft. below land surface measured on mo/day/yr. 8/27/09..... 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 17.50..... in. to 237..... 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 checked="" 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 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 .. 8..... in. to 237..... ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface..... 12..... in., Weight 7.0..... lbs./ft., Wall thickness or gauge No. SDR-21. (440) TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" 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 checked="" 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 type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify)						
SCREEN-PERFORATED INTERVALS: From 157..... ft. to 217..... ft., From ft. to ft. to ft. From ft. to ft., From ft. to ft. to ft. GRAVEL PACK INTERVALS: From 20..... ft. to 237..... 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 0..... ft. to 20..... ft., From ft. to 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 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 checked="" 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 Direction from well <i>East of South</i> Distance from well 90' <i>8 25'</i>						
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0'	1'	Top Soil		176'	198'	Sand Fn. to Med., Few Clays
1'	6'	Caliche, Gyp., Cemented Sand		198'	217'	Sand Fn. to Med., Sm. to Lg. Gravel
6'	17'	Cemented Sand				Few Lg. Brown, White, Tan Rocks
17'	49'	Brown Clay, Caliche		217'	224'	Brown Clay - Sticky
49'	62'	Sand Fn. to Med. Coarse, Few Ledges		224'	229'	Soapstone, Limestone
62'	70'	Brown Clay, Cemented Sand		229'	240'	Shale
70'	138'	Sand Fn. to Med., Some Sm. Gravel				
138'	150'	Brown Clay, Few Sand				
150'	171'	Sand Fn. to Med. Coarse				
171'	176'	Brown Clay				
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) 8/29/2009..... 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) 9/25/09..... under the business name of ..Henkle Drilling & Supply Co. Inc..... by (signature) <i>Brian J. Henkle</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 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html .						