WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. 28,315

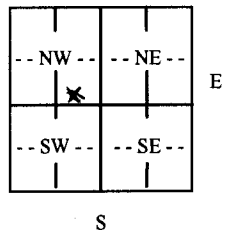
1 LOCATION OF WATER WELL: County: Finney | Fraction: ¼ NW ¼ SE ¼ SW ¼ | Section Number: 30 | Township No.: T 26 S | Range Number: R 33 ☐E ☑W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐.
approx 16 miles southwest of Garden City, KS

Global Positioning System (GPS) information:
Latitude: 37.75491 (in decimal degrees)
Longitude: 100.97469 (in decimal degrees)
Elevation: 2995
Datum: ☐ WGS 84, ☐ NAD 83, ☑ NAD 27
Collection Method:
☑ GPS unit (Make/Model: .....)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: JB Circle Land and Cattle
RR#, Street Address, Box #: 1955 W Plymell Rd
City, State, ZIP Code : Garden City, KS 67846

3 LOCATE WELL WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 561 ft.
Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL 252 ft. below land surface measured on mo/day/yr. 4/21/11
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 24 in. to 561 ft., and ..... in. to ..... ft.
WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well
☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below)
☑ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well .....
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No
If yes, mo/day/yr sample was submitted.....
Water well disinfected? ☑ Yes ☐ No

5 TYPE OF CASING USED: ☑ Steel ☐ PVC ☐ Other .....
CASING JOINTS: ☐ Glued ☐ Clamped ☑ Welded ☐ Threaded
Casing diameter 16 in. to 561 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 12 in., Weight 42.09 lbs./ft., Wall thickness or gauge No. 0.250
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 285 ft. to 365 ft., From 386 ft. to 556 ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 20 ft. to 370 ft., From 370 ft. to 561 ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ 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:
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☑ Other (specify below)
☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well None Detected
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well
Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	blow sand	282	300	sand fine to small, some clay
1	20	brown clay, few fine sands	300	317	sand fine to small, med
20	55	fine sand, thin clays	317	353	snd fne-med coarse sm-some med grvl
55	85	snd fn-md crse, sm-few lrge grvl	353	365	sd fn-md crs sm-few md gvl thin cly
85	152	snd fn-md crs sm-lrg grvl thn cly	365	382	brown clay
152	164	brown clay	382	399	brown clay, some sands
164	180	sd fn-md crs sm-few md grvl thn cly	399	414	fne snd, brown clay + limerck mixed
180	195	brown clay	414	423	brown clay
195	256	snd fn-md crse few sm grvl, clys	423	435	sand silty to fine, thin clay
256	282	brown clay, few limerock ledges	435	441	brown clay

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) 4/21/11 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) 5/9/11 under the business name of Hydro Resources 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.

KSA 82a-1212 Check: ☑ White Copy, ☑ Blue Copy, ☑ Pink Copy

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☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

3 LOCATE WELL WITH AN "X" IN SECTION BOX:

N / W / E / S — NW, NE, SW, SE; X in NW

|---------1 mile---------|

4 DEPTH OF COMPLETED WELL ..... ft.
Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL.....ft. below land surface measured on mo/day/yr.....
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 .....in. to .....ft., and .....in. to .....ft.
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☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below)
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well .....
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☐ No
If yes, mo/day/yr sample was submitted.....
Water well disinfected? ☐ Yes ☐ No

5 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other .....
CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ Threaded
Casing diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface..... in., Weight .....lbs./ft., Wall thickness or gauge No. .....
TYPE OF SCREEN OR PERFORATION MATERIAL:
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) .....
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
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☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify) .....
SCREEN-PERFORATED INTERVALS: From..... ft. to ..... ft., From ..... ft. to ..... ft.
From..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From..... ft. to ..... 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 ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to .....ft.
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☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well .....
Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
441	457	sand fine to small			
457	479	snd fn-md crs sm grvl some brwn rk			
479	485	brown clay			
485	529	soapstone, brwn + yllw sandstone			
529	556	sandstone, soapstone			
556	561	soapstone, few shale			

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) ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ..... This Water Well Record was completed on (mo/day/year) .....
under the business name of ..... by (signature) .....

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