| WATER WELL RECORD | | Form WWC-5 | | Di | vision of Wate | er Resources App. N | 0. 32,901 | |
|---|----------------------------------|------------------------|------------|---|--|---------------------------------------|------------------|--|
| 1 LOCATION OF WATER WELL: County: Hamilton | | Fraction 1/4 SW 1/4 SW | 1/4 SW 1/ | Section | on Number 33 | | Range Number | |
| Street/Rural Address of Well Location; if unknown, distance & direction | | | | | | System (GPS) ir | | |
| from nearest town or intersection: If at owner's address, check here . | | | | | Latitude: .37.73920 (in decimal degrees) | | | |
| RD 2 IN STANTON CO. APROX 3 MILES W TO FARM PATH N 1 MILE | | | | Longi Eleva | Longitude: 102.03468 (in decimal degrees) Elevation: Datum: □ WGS 84, □ NAD 83, ☑ NAD 27 | | | |
| 2 WATER WELL OWNER: RON FOX | | | | | Datum: ☐ WGS 84, ☐ NAD 83, ✔ NAD 27 Collection Method: | | | |
| RR#, Street Address, Box #: 3391 COUNTY ROAD E | | | | | ☐ GPS unit (Make/Model:) | | | |
| | am o 1 | USE, KS 67878 | Eii | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | | |
| | | | | | | | 5-15 m, □ >15 m | |
| 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 481 | | | | | | | | |
| SECTION BOX: Depth(s) Groundwater Encountered (1) ft (2) ft (3) ft | | | | | | | | |
| N N | | | | | | | | |
| Pump test data: Well water was .398ft. after .4 hours pumping .1354 gpn | | | | | | | | |
| EST. YIELDgpm. Well water wasft. after hours pumping gpm | | | | | | | | |
| W E Bore Hole Diameter 44in. to .48!ft., andin. toft. | | | | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | | | |
| | | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes V No | | | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | | | |
| 1 mile Water well disinfected? ✓ Yes □ No | | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | | | | | |
| CASING JOINTS: Glued Clamped Welded Threaded Casing diameter | | | | | | | | |
| Casing diameter 10 | | | | | | | | |
| 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 | | | | | | | | |
| Louvered shutter Key punched Wire wrapped Saw cut Other (specify) | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From 20 | | | | | | | | |
| 6 CROUT MATERIAL: Neat cement Cement grout 1 Bentonite Other | | | | | | | | |
| 6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other | | | | | | | | |
| 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 | | | | | | | | |
| | rom well .102 | | | | | | | |
| FROM TO | | | FROM | TO | | | JGGING INTERVALS | |
| 0 2 | Surface | | 372 | 377 | Soapstone | | | |
| 2 10 | Caliche & Brown Clay | | 377 | 400 | | e, sandstone (tig | ht) | |
| 10 50 | Brown Clay (firm) cem | | 400 | 420 | Soapstone | | | |
| 50 82 | Sand, Fine to Med,sm | to med gravel | 420 | 430 | | ndstone (loose) | -h+\ | |
| 82 92 92 255 | Brown Clay Sand, Fine to med, sm | to md. gravel | 430 439 | 450 | | e, soapstone (tig e, Few Soapston | | |
| 255 266 | brown clay | i to ma. graver | 450 | 461 | | e, Sandstone | | |
| 266 311 | blue & brown clay | | 461 | 468 | Soapstone | | | |
| 311 336 | Sand, Fine to md cour | se, sm gravel | 468 | 520 | | estone (hard) | | |
| 336 372 | Soapstone, Sandstone | | | | | | | |
| 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) .722-11 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) 9-2-11 | | | | | | | | |
| under the business name of Hydro Resources by (signature) Land 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, Pink Copy | | | | | | | | |
| 110/1 020-1212 | | | | C. | ٠١٠ کي ٠٠٠٠٠ | ~~PJ, E D1 | | |

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