

WATER WELL RECORD

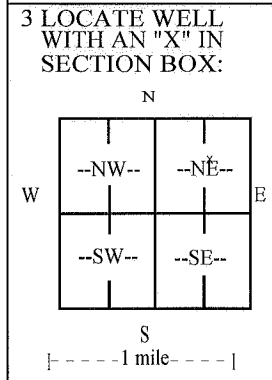
Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Kiowa, Fraction: 1/4 NC 1/4 NE 1/4, Section Number: 34, Township No.: T 27 S, Range Number: R 17 E W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: Approximately 2.5 miles north and 3 miles west of Haviland. Global Positioning System (GPS) information: Latitude: 37.65614, Longitude: -99.164238, Elevation: Unknown

2 WATER WELL OWNER: Herman Goertzen, RR#, Street Address, Box #: 669 Cherokee Rd., City, State, ZIP Code: Inman, KS 67546. Collection Method: GPS unit (Make/Model: WAAS)



3 LOCATE WELL WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: 140 ft. Depth(s) Groundwater Encountered (1) 59 ft. WELL'S STATIC WATER LEVEL 59 ft. below land surface measured on mo/day/yr 02/21/14

5 TYPE OF CASING USED: Steel PVC Other. CASING JOINTS: Glued Clamped Welded Threaded Other (Specify). Casing diameter 16 in. to 99 ft., Diameter 12 in. to 19.75 lbs./ft., Wall thickness or gauge No. 616. TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel PVC Other (Specify). SCREEN OR PERFORATION OPENINGS ARE: Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole). SCREEN-PERFORATED INTERVALS: From 99 ft. to 109 ft., From 109 ft. to 129 ft. GRAVEL PACK INTERVALS: From 22 ft. to 140 ft., From 140 ft. to 140 ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other. Grout Intervals: From 2 ft. to 22 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). Direction from well Distance from well

Table with columns FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Rows include: 0-10 Sand, fine; 10-30 Clay, gray, yellow; 30-60 Sand & gravel, fine to coarse; 60-139 Sand & gravel, fine to coarse, very tight; 139-140 Clay, gray, brown.

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) 02/21/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 02/24/14 under the business name of Clarke Well & Equipment, Inc. 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.