

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

Blank box for application number

1 LOCATION OF WATER WELL: County: Kiowa, Fraction: NE 1/4 NE 1/4 NE 1/4, Section Number: 26, Township Number: T 27 S, Range Number: R 19 E/W

Distance and direction from nearest town or city street address of well if located within city? 4 North, 3 3/4 West of Greensburg

2 WATER WELL OWNER: Hilliard Brothers of Kansas, RR#, St. Address, Box #: 5500 Flaghole Rd, City, State, ZIP Code: Clewiston, Fl. 33440

Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: Longitude: Elevation: Datum: Data Collection Method:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N, W, E, S grid with X in NE quadrant

4 DEPTH OF COMPLETED WELL: 160 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL.....67..... ft. below land surface measured on mo/day/yr....2-5-07...

5 TYPE OF CASING USED: 5 Wrought Iron, 8 Concrete tile, CASING JOINTS: Glued..X.... Clamped....., 1 Steel, 3 RMP (SR), 6 Asbestos-Cement, 9 Other (specify below), Welded....., 2 PVC, 4 ABS, 7 Fiberglass, Threaded.....

Blank casing diameter5..... in. to140..... ft., Diameter..... in. to ft., Diameter..... in. toft. Casing height above land surface.....18..... in., Weight ..SDR=26.....lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel, 3 Stainless Steel, 5 Fiberglass, 7 PVC, 9 ABS, 11 Other (Specify), 2 Brass, 4 Galvanized Steel, 6 Concrete tile, 8 RM (SR), 10 Asbestos-Cement, 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot, 3 Mill slot, 5 Gauzed wrapped, 7 Torch cut, 9 Drilled holes, 11 None (open hole), 2 Louvered shutter, 4 Key punched, 6 Wire wrapped, 8 Saw Cut, 10 Other (specify)

SCREEN-PERFORATED INTERVALS: From.....160..... ft. to140..... ft., From..... ft. to ft., From..... ft. to ft.

GRAVEL PACK INTERVALS: From.....160..... ft. to23..... ft., From..... ft. to ft., From..... ft. to ft.

6 GROUT MATERIAL: 1 Neat cement, 2 Cement grout, 3 Bentonite, 4 Otherhole plug....., Grout Intervals: From..... ft. to ft., From..... ft. to ft., From.....23..... ft. to ..3.....ft.

What is the nearest source of possible contamination: 1 Septic tank, 4 Lateral lines, 7 Pit privy, 10 Livestock pens, 13 Insecticide Storage, 16 Other (specify below), 2 Sewer lines, 5 Cess pool, 8 Sewage lagoon, 11 Fuel storage, 14 Abandoned water well, 3 Watertight sewer lines, 6 Seepage pit, 9 Feedyard, 12 Fertilizer Storage, 15 Oil well/gas well,None.....

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows: 0-20 Sand & gravel with sandt clay, 20-35 Sand & gravel with clay mixed, 35-110 Sand & gravel, 110-115 Clay, 115-160 Sand & gravel

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ..2-27-07..... 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) ..3-13-07..... under the business name of Rosencrantz- Bemis by (signature) Jon A. Bemis

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies 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 to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html.