

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: <u>FOLD</u> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input checked="" type="checkbox"/>	Fraction <u>NE 1/4 NE 1/4 NW 1/4 NW 1/4</u>	Section Number <u>2</u>	Township No. <u>T 27 S</u>	Range Number <u>R 25</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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2 WATER WELL OWNER: United Wireless
 RR#, Street Address, Box #: 1107 W MCARTER ROAD
 City, State, ZIP Code: DONNE CITY, KS 67801

Global Positioning System (GPS) information:
 Latitude: (in decimal degrees)
 Longitude: (in decimal degrees)
 Elevation:
 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

3 LOCATE WELL WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF COMPLETED WELL <u>200'</u> 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 <u>5 1/2</u> in. to <u>200</u> ft., and in. to ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input checked="" type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input 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 type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No
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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:
☐ 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..... 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 200 ft. to 0 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
☒ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well

Direction from well N. 100' Distance from well 100'

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	8'	<u>Sandy Loam</u>	200	0	Enhanced Thermal Pump & Filtration
8'	100'	<u>Loam (Fine)</u>	200	0	<u>Enhanced Thermal Pump & Filtration</u>
100'	115'	<u>COARSE SAND</u>			
115'	165'	<u>SAND</u>			
165'	200'	<u>CLAY (SOFT GRAY)</u>			

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) 08-24-10 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 913 This Water Well Record was completed on (mo/day/year) 09-24-10
 under the business name of FIRE & ICE GEOTHERMAL by (signature) Michael J. [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>.