

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

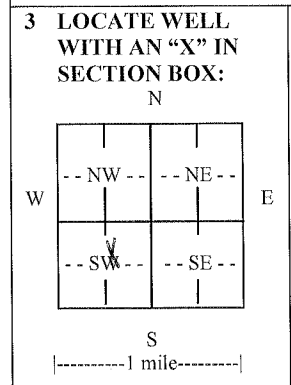
10922

1 LOCATION OF WATER WELL: County: Grant	Fraction ¼ SW ¼ NE ¼ SW ¼	Section Number 6	Township No. T 27 S	Range Number R 37 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .
17 miles south then appr 3 miles west of Lakin

Global Positioning System (GPS) information:
Latitude: .37,72631.N..... (in decimal degrees)
Longitude: 101.41273.W..... (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

2 WATER WELL OWNER: Lechter Waechter
RR#, Street Address, Box #: 805 N Jovce
City, State, ZIP Code : Ulysses, Ks 67880



4 DEPTH OF COMPLETED WELL 680..... ft.
Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL 248.....ft. below land surface measured on mo/day/yr. 8-5-2011.....
Pump test data: Well water was 407.....ft. after 4..... hours pumping 762..... gpm
EST. YIELD.....gpm. Well water was.....ft. after..... hours pumping..... gpm
Bore Hole Diameter 24.....in. to 680.....ft., andin. toft.
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 .673..... 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. .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 194..... ft. to 234..... ft., From 260..... ft. to 300..... ft.
From 326..... ft. to 419..... ft., From 505..... ft. to 675..... ft.
GRAVEL PACK INTERVALS: From 20..... ft. to 680..... 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 .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
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well
Direction from well South and West..... Distance from well .286 & .66.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Top Soil	221	259	Brown Clay, few lime rock
2	68	Brown Clay, sticky	259	300	Find to med Sand
68	95	Gray & Light Green Clay sticky	300	325	Yellow Soapstone
95	122	Brown sticky clay	325	416	Sandstone, few sand strips
122	157	Blue sticky clay	416	500	Black Shale Drill Hard
157	166	Brwn sandy clay, sand strings	500	675	Sandstone, drill tight
166	205	Fine to Med Sand, sm gravel	675	680	Red Bed
205	209	Brown Clay			
209	216	Sand Fine to Med Course			
216	221	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) 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) 10-10-11.....
under the business name of HYDRO RESOURCES..... by (signature) *Thomas Kalka*.....

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>.