

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

MW-202

Original Record Correction Change in Well Use

Well ID

1 LOCATION OF WATER WELL: County: Pratt Fraction SE 1/4 NE 1/4 SW 1/4 SW 1/4 Section Number 6 Township Number T 28 S Range Number R 14 E W

2 WELL OWNER: Last Name: Slade First: Jeffrie&Amy Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: Business: Address: 10285 NW 130th Ave City: Haviland State: KS ZIP: 67059 N 4th st & US-54

3 LOCATE WELL WITH "X" IN SECTION BOX:
N
W E
S
[Diagram showing a 3x3 grid with 'X' in the center square and 'NW', 'NE', 'SW', 'SE' in the corners. A scale bar below indicates 1 mile.]

4 DEPTH OF COMPLETED WELL:106..... ft.
Depth(s) Groundwater Encountered: 1)91..... ft.
2) ft. 3) ft. or 4) Dry Well
WELL'S STATIC WATER LEVEL:91..... ft.
 below land surface, measured on (mo-day-yr) 12/16/2021
 above land surface, measured on (mo-day-yr)
Pump test data: Well water was ft.
after hours pumping gpm
Well water was ft.
after hours pumping gpm
Estimated Yield: gpm
Bore Hole Diameter:8.5..... in. to106..... ft. and
..... in. to ft.

5 Latitude:37.631990.....(decimal degrees)
Longitude:-98.901188.....(decimal degrees)
Horizontal Datum: WGS 84 NAD 83 NAD 27
Source for Latitude/Longitude:
 GPS (unit make/model: Geode.....)
(WAAS enabled? Yes No)
 Land Survey Topographic Map
 Online Mapper:
6 Elevation: 2038.2ft. Ground Level TOC
Source: Land Survey GPS Topographic Map
 Other

7 WELL WATER TO BE USED AS:
1. Domestic: Household Lawn & Garden Livestock
2. Irrigation
3. Feedlot
4. Industrial
5. Public Water Supply: well ID
6. Dewatering: how many wells?
7. Aquifer Recharge: well ID
8. Monitoring: well ID MW-202
9. Environmental Remediation: well ID
 Air Sparge Soil Vapor Extraction
 Recovery Injection
10. Oil Field Water Supply: lease
11. Test Hole: well ID
 Cased Uncased Geotechnical
12. Geothermal: how many bores?
a) Closed Loop Horizontal Vertical
b) Open Loop Surface Discharge Inj. of Water
13. Other (specify):

Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:
Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded
Casing diameter4..... in. to106..... ft., Diameter in. to ft., Diameter in. to ft.
Casing height above land surface5.88..... in. Weight lbs./ft. Wall thickness or gauge No. SCHD 40
TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel Fiberglass PVC Other (Specify)
 Brass Galvanized Steel Concrete tile None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
 Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)
 Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)
SCREEN-PERFORATED INTERVALS: From86..... ft. to106..... ft. From ft. to ft. From ft. to ft.
GRAVEL PACK INTERVALS: From81..... ft. to106..... ft. From ft. to ft. From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
Grout Intervals: From0..... ft. to81..... ft. From ft. to ft. From ft. to ft.
Nearest source of possible contamination:
 Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage
 Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well
 Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well
 Other (Specify) none
Direction from well? Distance from well? ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Surface			
2	12	Loess			
12	43	Clay with traces of caliche			
43	66	Clay with caliche lenses			
66	74	Fine & medium sand with clay and caliche lenses			
74	93	Clay and caliche with traces of fine sand			Notes:
93	106	Fine to some medium sand with clay and caliche lenses			

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 12/16/2021 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 881 This Water Well Record was completed on (mo-day-year) 3/22/2022 under the business name of Wooffer Pump and Well Inc # 881 Signature

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. Visit us at <http://www.kdheks.gov/waterwell/index.html> KSA 82a-1212 Revised 7/10/2015