| WATE  | R WELI  | L REC         | ORD                                   |                     | Form        | WWC-        | 5          | Divisi                         | on of Wate    | r Resources;               | App. No.      |  |
|---|---|---------------|---------------------------------------|---------------------|-------------|-------------|------------|--------------------------------|---------------|----------------------------|---------------|--|
|   |   |               | ER WELL:                              | F                   | raction     |             |            | Section 1                      |               | Township                   | Number        |  |
| Cou   | nty: Kiowa  | 1             |                                       |                     | E ,NE       |             |            | 34                             |               | T 28                       | S             | R 20 EW                                  |
| Distance and direction from nearest town or city street address of well if located within city?  Global Positioning Systems (decimal degrees, min. of 4 Latitude: |   |               |                                       |                     |             |             |            |                                |               |                            |               | es, min. of 4 digits)                    |
| located within city? 1 south of Mullinville, 1 1/2 west into section  |   |               |                                       |                     |             |             |            | Longitude:                     |               |                            |               |  |
| 2 WATER WELL OWNER: Richard A. Sherer   |   |               |                                       |                     |             |             |            |                                |               |                            |               |  |
| RR#, St. Address, Box # Richard A. Sherer   |   |               |                                       |                     |             |             |            | Elevation:                     |               |                            |               |  |
| City, State, ZIP Code  Rt 1 Box 172  Mullinville, KS 67109  |   |               |                                       |                     |             |             |            | Datum: Data Collection Method: |               |                            |               |  |
| 1   | ATE WE  |               | 4 DEPTH OF                            |                     |             |             | 5          | Data Co                        | ft.           | ·                          | <del></del>   |  |
|   | CATION  | LLS           | 4 DEI III OI V                        | COMIT EL            | JILD W      |             |            |                                |               |                            |               |  |
|   | TH AN "X  | " IN          | Depth(s) Groun                        | ndwater I           | Encounter   | red (1)     |            | ft.                            | (2)           | f                          | t. (3)        | ft.                                      |
| SEC   | TION BO   | X:            | WELL'S STAT                           | IC WATE             | R LEVE      | L 42`       | ft.        | below lar                      | nd surface    | measured                   | on mo/day     | ft.                                      |
|   | N   | -             | Pump te                               | est data: \         | Well wate   | r was       |            | ft. after                      |               | hours                      | pumping       | gpm                                      |
|   |   |               | Est. Yield                            | gpm: \              | Well wate   | r was       |            | ft. after                      |               | hours                      | pumping_      | gpm                                      |
| N   | wNE   | E             | WELL WATER                            | TO BE               | JSED AS     | : 5 Publ    | ic water s | supply                         | 8 Air         | conditioni                 | ng 11 Inje    | ection well<br>ther (Specify below)      |
| w   |   | E             | Domestic                              | 3 Feedlo            | t 6         | Oil field   | water su   | pply                           | 9 Dew         | atering                    | 12 Ot         | her (Specify below)                      |
|   | X   | - 1 - 1       | 2 Irrigation 4                        | i Industria         | al / I      | Domestic    | (lawn&     | garden)                        | 10 Mor        | litoring we                |               |  |
| S   | W SE  | E             | Was a chemical                        | /hacteriol          | ogical sar  | nnle suhi   | mirted to  | Denartme                       | nt'9 Ves      | No                         | Х .т          | fives molday/yrs                         |
|   | Was a chemical/bacteriological sample submitted to Department'? Yes |               |                                       |                     |             |             |            |                                |               |                            |               |  |
| ĺ   | S   |               | Sample was sub                        | mittod              |             |             | ·          |                                |               |                            | 110           |  |
| 5 TVD   |   | INC II        | SED: 5 Wr                             | ought Iros          | •           | 9 Cone      | rata tila  |                                | CASIN         | C IOINTS                   | Clued X       | Clamped                                  |
| 1   | Steel   |               | (SR) 6 Asl                            | bestos-Ce           | l<br>ment   | 9 Other     | r (specify | helow)                         | CASIN         | G JOIN I S.                |               | Clamped                                  |
| ا ا   | -PV8  | 4 ABS         | 7 Fib.                                | erolass             | inciit      | y Other     | (specify   | ociow)                         |               |                            | Threaded      |  |
| Blank casing diameter 5 in to 95 ft., Diameter in. to 10 in., Weight SCH 40 lbs./ft. Wall thickness or guage No.  |   |               |                                       |                     |             |             |            |                                |               |                            | in, to ft.    |  |
| Casing  | height abo  | ve land s     | surface 2 ft                          |                     | in., Weig   | ht SCH      | 40         | lbs./ft. V                     | Vall thick    | cness or gu                | iage No.      |  |
| TYPE  | OF SCREE  | N OR P        | ERFORATION I                          | MATERIA             | AL:         |             |            |                                |               |                            | Ü             |  |
|   | Steel   |               | iless Steel                           |                     |             |             |            | BS                             |               |                            |               |  |
| 1   | Brass   |               | vanized Steal 6                       |                     | tile 8      | RM (SR      | .) 10 1    | Asbestos-                      | Cement        | 12 None                    | used (open    | hole)                                    |
| 1   |   |               | TION OPENING                          |                     |             |             |            |                                |               |                            |               |  |
|   |   |               | 3 Mill slot                           |                     |             |             |            |                                |               |                            |               |  |
| SCREE   | Louvered  | l shutter     | 4 Key punched                         | 16 Wire<br>From 115 | wrapped     | 8 8         | Saw Cut    | 10 Otne                        | r (specif     | у)                         |               | ft.                                      |
| SCREE   | M-PERFO   | KATED         | INTERVALS.                            | From                |             | ft to       |            | It.,                           | From          |                            | ft to         | II.,                                     |
|   | GRAVEI  | PACK          | INTERVALS                             | From 115            |             | ft to       | 58         | ft.                            | From          |                            | ft. to        | ft.                                      |
|   | OMITTE  | 3 111011      |                                       | From                |             | ft. to .    |            | ft.                            | , From        |                            | ft. to        | ft.                                      |
|   | ***   |               |                                       |                     |             |             |            |                                |               |                            |               |  |
| 1   | UT MATI   |               | I Neat ceme                           | ent 2 Cen           | nent grou   | ut 3 Ben    | tonite     | 4 Other.                       |               |                            |               |  |
|   | ntervals:   |               |                                       |                     |             | From        |            | ft. to                         | f             | t., From                   |               | ft. to ft.                               |
| 1   |   |               | of possible conta                     |                     |             | ,           |            |                                | 10.7          |                            |               | 1601 6 10                                |
|   | Septic tan  |               | 4 Lateral                             |                     |             |             | 0 Livest   |                                |               | secticide St<br>bandoned w |               | 16 Other (specify                        |
| 2 3   | Sewer line  | S<br>at sewer | 5 Cess po                             | OI 05<br>enit 0 F   | Sewage la   |             | I Fuel st  |                                |               |                            |               | below)                                   |
| Direction   | on from we  | 112 999       | lines 6 Seepage                       | c pit 9 i           | ccuyaru     | ī           | How many   | v feet? 99                     | 59            | well/gas v                 | VCII          |  |
| FROM  | TO  | 1             | LITHOI                                | OGIC LO             | OG          | · · · · · · | FROM       |                                | 1             | PLUGO                      | GING INT      | ERVALS                                   |
| 0   | 10  | Silty To      | ***                                   | 30010 2             |             |             | 115'       | 58'                            | Gravel        |                            | 31110 1111    |  |
| 10  | 35  | Fine Sa       |                                       |                     |             |             | 58'        | 0                              |               | te Hydrate                 | d             |  |
| 35  | 60  |               | n Gravel/White                        | Clavs               |             |             |            |                                |               |                            |               |  |
| 60  | 80  | Tan Cla       |                                       |                     |             |             | 1          |                                |               |                            |               |  |
| 80  | 115   |               | ered Grey Shale                       |                     |             |             |            |                                |               |                            |               |  |
|   |   |               | · · · · · · · · · · · · · · · · · · · |                     |             |             |            |                                |               |                            |               |  |
|   |   |               |                                       |                     |             |             |            |                                |               |                            |               |  |
|   |   |               |                                       |                     |             |             |            |                                |               |                            |               |  |
|   |   |               |                                       |                     |             |             |            |                                |               |                            |               |  |
|   |   |               |                                       |                     |             |             |            |                                |               |                            |               |  |
| 7 CON   | TRACTOR   | R'S OR I      | LANDOWNER'S                           | S CERTIF            | FICATIO     | N: This     | water we   | ll was(¶)                      | construc      | cted, (2) re               | constructe    | d, or (3) plugged                        |
| under m   | y jurisdict   | ion and       | was completed of                      | n (mo/day           | /year) 12   |             | and        | this recor                     | rd is true    | to the best of             | of my knoy    | ed, or (3) plugged<br>wledge and belief. |
| Kansas  | Water Wel   | ll Contra     | ictor's License N                     | 0                   | Th          | is Water    | Well Red   | cord was c                     | completed     | en/mo/da                   | y/year) 🖆     | 20/00                                    |
| under th  | CTIONS: U   | name o        | ter or hall point non                 | PIFACE I            | PRESS EID   | MI Y and D  | RINT clear | / (Signatu                     | ill in Hard   | underline or               | circle the or | orrect answers. Send top                 |
| three con   | ies to Kansas   | Departmen     | nt of Health and Envi                 | ironment. Bi        | ureau of Wa | ter. Geolog | v Section. | 1 000 SW Ja                    | ackson/St., S | Suite 420, Top             | eka, Kansas ( | 66612-1 367. Telephone                   |
| 785-29  | 6-5522. Se  | end one t     | to WATER WEI                          | LL OWNE             | ER and re   | tain one    | for your   | records. I                     | Fee 6f \$5    | .00 for eac                | h construc    | ted well. Visit us at                    |
| nttp://ww   | w.kdhe.state.l  | ks.us/geo/v   | waterwells.                           |                     |             |             |            |                                |               |                            |               |  |