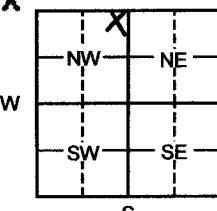


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. 10,409

1 LOCATION OF WATER WELL: County: Gray		Fraction NE $\frac{1}{4}$ NE $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number 27	Township Number T 28 S	Range Number R 30 E/W		
Distance and direction from nearest town or city street address of well if located within city? From Pierceville, South approx. 16 miles, East approx. 3 miles, South approx. 4 miles, East approx. 2 & 4/10 mi., South approx. 700 ft., & Southwest approx. 950 ft.			Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____				
2 WATER WELL OWNER: Ron Jantz RR#, St. Address, Box # : 32305 2 Road City, State, ZIP Code : Copeland, Ks, 67837							
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 200 ft.					
 N W E S		Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. WELL'S STATIC WATER LEVEL 160 ft. below land surface measured on mo/day/yr 3/12/08 Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well					
		Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> ; If yes, mo/day/ys Sample was submitted Water Well Disinfected? Yes <input checked="" type="checkbox"/> No					
5 TYPE OF CASING USED:		5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____			
<input checked="" type="radio"/> 1 Steel 3 RMP (SR) <input type="radio"/> 2 PVC 4 ABS		6 Asbestos-Cement	9 Other (specify below)	Welded	<input checked="" type="checkbox"/>		
Blank casing diameter 16 in. to 200 ft., Dia		in. to	ft., Dia	in. to	ft.		
Casing height above land surface 12 in., Weight 42 lbs./ft.				Wall thickness or gauge No.	.250		
TYPE OF SCREEN OR PERFORATION MATERIAL:							
<input checked="" type="radio"/> 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) <input type="radio"/> 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
<input checked="" type="radio"/> 1 Continuous slot 3 Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) <input type="radio"/> 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)							
SCREEN-PERFORATED INTERVALS: From 180 ft. to 200 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							
GRAVEL PACK INTERVALS: From 20 ft. to 200 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							
6 GROUT MATERIAL: 1 Neat cement		2 Cement grout	3 Bentonite	4 Other			
Grout Intervals From 0 ft. to 20 ft.		From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ ft.	From _____ ft. to _____ 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) 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							
Direction from well? _____ How many feet? _____							
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS	
0	30	Topsoil & clay					
30	60	Clay					
60	95	Clay & lime					
95	105	Sand, clay, & lime					
105	113	Clay & lime					
113	142	Sand & clay					
142	154	Clay & lime					
154	174	Sand, clay, & cemented sand					
174	176	Cemented sand					
176	182	Clay & lime					
182	195	Sand & cemented sand					
195	201	Sand					
201	210	Clay & lime					
210	217	Sand & clay					
217	230	Clay & lime					

230	231	Lime			
231	232	Sand			
232	233	Lime			
233	245	Sand & clay			
245	246	Lime			
246	252	Clay & lime			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) deconstructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 11/4/2008 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) 11/12/08 under the business name of Henkle Drilling & Supply Co., Inc. by (signature) Barry J. Richardson.

INSTRUCTIONS: Please fill in blanks 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>.