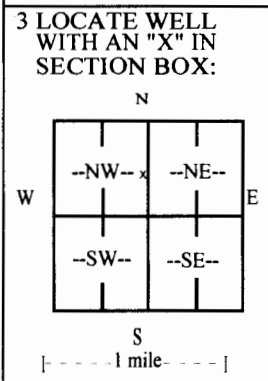


1 LOCATION OF WATER WELL: County: Kingman	Fraction 1/4 1/4 CE 1/4 NW 1/4	Section Number 8	Township No. T 29 S	Range Number R 9 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
 Approximately 6.5 miles north and 9 miles west of Spivey.

Global Positioning System (GPS) information:
 Latitude: **37.540199** (in decimal degrees)
 Longitude: **-98.327854** (in decimal degrees)
 Elevation: **Unknown**
 Datum: WGS 84, NAD 83, NAD 27
 Collection Method:
 GPS unit (Make/Model: **WAAS**)
 Digital Map/Photo, Topographic Map, Land Survey
 Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m

2 WATER WELL OWNER: **Jack Thimesch**
 RR#, Street Address, Box #: **11716 SW 80th St.**
 City, State, ZIP Code : **Spivey, KS 67142**



4 DEPTH OF COMPLETED WELL **114** ft.

Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
 WELL'S STATIC WATER LEVEL **48** ft. below land surface measured on mo/day/yr **06/16/16**

Pump test data: Well water was **not checked** ft. after _____ hours pumping _____ gpm
 EST. YIELD _____ gpm. Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter **9** in. to **115** ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below) **Supply Well**
 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 Other (Specify) _____

Casing diameter **5** in. to **92** ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface **24** in., Weight **2.36** lbs./ft., Wall thickness or gauge No. **.214**

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 **92** ft. to **112** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **20** ft. to **115** 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 **None Known**
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well

Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Topsoil			gravel
2	7	Clay, yellow, white	56	60	Clay, yellow, white, caliche
7	20	Sand, gravel, fine to medium	60	63	Clay, gray, brown, yellow, caliche
20	30	Clay, brown	63	76	Sand, fine to coarse, fine to medium gravel
30	34	Clay, yellow	76	77	Clay, brown, gray
34	40	Sand, fine to coarse	77	79	Sand, fine to coarse
40	50	Sand, fine to coarse, fine to medium	79	81	Clay, brown, gray
		gravel	81	85	Clay, brown, sandy, sand streaks
50	52	Clay, yellow, white	85	100	Sand, fine to coarse, fine to medium gravel
52	56	Sand, fine to coarse, fine to medium			Continued on back side

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) **06/16/16** and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. **185** This Water Well Record was completed on (mo/day/year) **06/17/16**
 under the business name of **Clarke Well & Equipment, Inc.** by (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>.

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township No.	Range Number
County: Kingman	$\frac{1}{4}$ $\frac{1}{4}$ CE $\frac{1}{4}$ NW $\frac{1}{4}$	8	T 29 S	R 9 <input type="checkbox"/> E <input checked="" type="checkbox"/> W

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
100	101	Clay, brown			
101	110	Sand, fine to coarse, fine gravel, brown clay streaks			
110	115	Sand, fine to coarse, fine gravel, occasional brown or white clay streak			

RECEIVED
JUL 08 2016
KS GEO SURVEY