

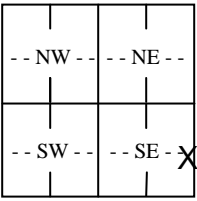
WATER WELL RECORD Form WWC-5 1096421

 Division of Water Resources App. No.

 Well ID
 Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL: County:	Fraction ¼ ¼ ¼ ¼	Section Number	Township Number T S	Range Number R E W
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2 WELL OWNER: Last Name: First: Business: Address: Address: City: State: ZIP:	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: <input type="checkbox"/>
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3 LOCATE WELL WITH "X" IN SECTION BOX: N  S W E -----1 mile-----	4 DEPTH OF COMPLETED WELL: ft. Depth(s) Groundwater Encountered: 1) ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ft. <input type="checkbox"/> below land surface, measured on (mo-day-yr)..... <input type="checkbox"/> 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: in. to ft. and in. to ft.	5 Latitude:(decimal degrees) Longitude:(decimal degrees) Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model:)(WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: 6 Elevation:ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other
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7 WELL WATER TO BE USED AS: 1. Domestic: 5. <input type="checkbox"/> Public Water Supply: well ID <input type="checkbox"/> Household 6. <input type="checkbox"/> Dewatering: how many wells? <input type="checkbox"/> Lawn & Garden 7. <input type="checkbox"/> Aquifer Recharge: well ID <input type="checkbox"/> Livestock 8. <input type="checkbox"/> Monitoring: well ID 2. <input type="checkbox"/> Irrigation 9. Environmental Remediation: well ID <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction 3. <input type="checkbox"/> Feedlot <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 4. <input type="checkbox"/> Industrial	10. <input type="checkbox"/> Oil Field Water Supply: lease 11. Test Hole: well ID <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify):
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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 diameter in. to ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No.

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: From ft. to ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well

Other (Specify)

Direction from well? Distance from well? ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
			Notes:		

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) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of

Form	WWC5
Contractor	Hydro Resources Mid Continent, Inc.
Well Owner	
Doc ID	1096421

Litholgy

From	To	LithologicLog
0	2	SURFACE
2	6	FINE SAND
6	15	BROWN SANDY CLAY
19	26	FINE SAND
26	58	BROWN CLAY
58	123	FINE TO MED SAND
123	143	BROWN CLAY
143	205	FINE TO MED SAND (USED WATER)
205	214	BROWN CLAY FEW SAND
214	229	SAND FINE TO MED FEW COURSE THIN CLAY
229	240	SAND FINE TO MED FEW COARSE
240	270	SAND FINE TO SMALL THIN CLAYS
270	275	SAND FINE TO MED
275	280	SAND FINE
280	297	BROWN CLAY (FIRM & STICKY) FEW LIMEROCK
297	320	SANDSTONE, SOAPSTONE, (FAIRLY LOOSE) (FALSE REDBED) 315-318
320	340	SANDSTONE, SOAPSTINE
340	394	SOAPSTONE, SANDSTONE, FEW RED SOAP

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From	To	LithologicLog
394	427	SOAPSTONE, SANDSTONE, FEW LIMESTONE (TIGHT)
427	440	SOAPSTONE, LIMESTONE, SANDSTONE (HARD, USED WATER)
440	452	SOAPSTONE RED SHALE
452	470	RED BED (HARD)