| WATER WE | LL RECORD | Form WWC-5 | Division of Wate | r Resources App. No | 0. | |
|---|---|-------------------------------|---|---------------------|------------------|--|
| | N OF WATER WELL: | Fraction | , | Township No. | Range Number | |
| County: Ba | | 1/4 NW 1/4 SW 1/4 NW 1/4 | | T 32 S | R 14 □E 🗗 W | |
| Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information: | | | | | | |
| from neares | town or intersection: If at | owner's address, check here . | Latitude: (in decimal degrees) | | | |
| 1/4 South, 2 East of Deerhead, KS | | | Longitude: (in decimal degrees) | | | |
| | | | Elevation: | | | |
| 2 WATER WELL OWNER: Delta Land | | | Datum: WGS 84, NAD 83, NAD 27 Collection Method: | | | |
| RR#, Street Address, Box #: PO Box 259 | | | GPS unit (Make/Model:) | | | |
| City, State, ZIP Code : Mer Rouge, LA 71261 | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | |
| | | ude, EA 7 1201 | Est. Accuracy: - | 3 m, ☐ 3-5 m, ☐ | 5-15 m, | |
| 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 80 ft. | | | | | | |
| WITH AN " | | | | | (0) | |
| SECTION B | Depth(s) Groundwater Encountered (1) | | | | | |
| | Pump test data: Well water wasft. after | | | | | |
| | | | | | | |
| W NW - NE - EST. YIELD N/Agpm. Well water was | | | | | | |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well | | | | | | |
| SWSE ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) | | | | | | |
| ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well Stock | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? ☐ Yes ✓ No | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | |
| mile Water well disinfected? ✓ Yes □ No | | | | | | |
| 5 TYPE OF CASING USED: Steel V PVC Other | | | | | | |
| CASING JOINTS: Glued Clamped Welded Threaded | | | | | | |
| Casing diameter .5 | | | | | | |
| Casing height above land surface. 18 in., Weight SDR-26 lbs./ft., Wall thickness or gauge No. | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | |
| ☐ Steel ☐ Stainless Steel | | | | | | |
| ☐ 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 60 ft. to 40 ft., From ft. to ft. | | | | | | |
| Fromft. toft. Fromft. toft. | | | | | | |
| GRAV | EL PACK INTERVALS: | From 80 ft. to .20 | ft., From | ft. | to ft. | |
| From ft to ft From ft to ft | | | | | | |
| 6 GROUT MATERIAL: Neat cement Cement grout Denotite Other Grout Intervals: From ft. to ft., From 20 ft., From ft. to ft. | | | | | | |
| Grout Intervals: From | | | | | | |
| 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 ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well None | | | | | | |
| | om well | | 2 — 2 | | Y | |
| FROM TO | LITHOLOG | | | | JGGING INTERVALS | |
| 0 5 | Top soil & clay | TROW | I LITTO, L | oo (cont.) or 1 LC | COULD HATEK AVES | |
| 5 34 | Sand w/ clay streaks | | | | | |
| 34 38 | Sandy tan clay | | | | | |
| 38 46 | Sand & gravel | | | | | |
| 46 53 | Tan clay | | | | | |
| 53 54 | Sand & gravel | | | | | |
| 54 80 | Red bed | | | | | |
| | | | | | | |
| | | | | 1000 | | |
| | | | | *** | | |
| 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) .91914 and this record is true to the best of my knowledge and belief. | | | | | | |
| Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/year) 9-17-14. | | | | | | |
| under the business name of Rosencrantz-Bemis Ent Inc by (signature) | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Depar tment of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. | | | | | | |
| Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Vi sit us at | | | | | | |
| http://www.kdheks.gov/waterwell/index.html | | | | | | |
| KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy | | | | | | |