#1

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: Clark	¼ NE ¼ NE ¼ NE ¼	14	T 32 S	R 21 ☐E ☑W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐.

2 miles West of County line on HWY 160, 5 miles North, Northeast into.

Global Positioning System (GPS) information:
Latitude: ..37...16.24.................... (in decimal degrees)
Longitude: 99..1931.................... (in decimal degrees)
Elevation: .1945.........
Datum: ☑ WGS 84, ☐ NAD 83, ☐ NAD 27
Collection Method:
☐ GPS unit (Make/Model: ....)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: Steve Stephens — #1
RR#, Street Address, Box #: 1372 CR 31
City, State, ZIP Code : Ashland, KS 6781

3 LOCATE WELL WITH AN "X" IN SECTION BOX:

N
W --NW-- --NE-- E (X in NE)
--SW-- --SE--
S
|---------1 mile---------|

4 DEPTH OF COMPLETED WELL .85............ ft.
Depth(s) Groundwater Encountered (1).......... ft. (2).......... ft. (3).......... ft.
WELL'S STATIC WATER LEVEL..38..........ft. below land surface measured on mo/day/yr..8/8/11.........
Pump test data: Well water was..............ft. after.............. hours pumping.............. gpm
EST. YIELD..80.....gpm. Well water was..............ft. after.............. hours pumping.............. gpm
Bore Hole Diameter .10 5/8.....in. to .85...........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)
☐ 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
Casing diameter .5............ in. to .65......... ft., Diameter .... in. to .... ft., Diameter .... in. to .... ft.
Casing height above land surface..24............... in., Weight SDR-17......lbs./ft., Wall thickness or gauge No. ....
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...85.............ft. to ..65.............ft., From ....ft. to ....ft.
From...............ft. to ....ft., From ....ft. to ....ft.
GRAVEL PACK INTERVALS: From...............ft. to ....ft., From ....ft. to ....ft.
From..85.........ft. to ..20.........ft., From ....ft. to ....ft.

6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other ....
Grout Intervals: From .20.......... ft. to .0.......... 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
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well ..Open Field...........
Direction from well .... Distance from well ....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	85	Red Shale			

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) .8/8/2011........ and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. .665........ This Water Well Record was completed on (mo/day/year) .1/23/2012............
under the business name of ..Pratt Well Service........................... by (signature) ....

KSA 82a-1212   Check: ☑ White Copy, ☑ Blue Copy, ☑ Pink Copy