

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

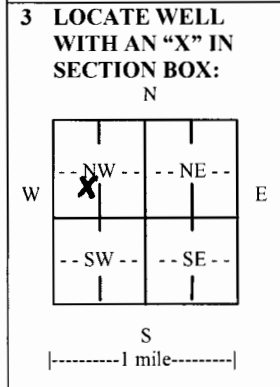
4,997 ; 10,058

1 LOCATION OF WATER WELL: County: Stevens	Fraction $\frac{1}{4}$ NE $\frac{1}{4}$ SW $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number 6	Township No. T 32 S	Range Number R 36 <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 approx. 4.4 miles southwest of Moscow, KS

Global Positioning System (GPS) information:
 Latitude: **37.29600** (in decimal degrees)
 Longitude: **101.28272** (in decimal degrees)
 Elevation: **3122**
 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: John Brower
 RR#, Street Address, Box #: **1545 Rd X**
 City, State, ZIP Code : **Moscow, KS 67952**



4 DEPTH OF COMPLETED WELL 571..... ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL **340**.....ft. below land surface measured on mo/day/yr. **12/31/11**.....

Pump test data: Well water was **392**.....ft. after **4**..... hours pumping **1270**..... gpm

EST. YIELD.....gpm. Well water was.....ft. after..... hours pumping..... gpm

Bore Hole Diameter **24**.....in. to **571**.....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 **.16**..... in. to **571**..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
 Casing height above land surface **12**..... in., Weight **42.09**.....lbs./ft., Wall thickness or gauge No. **0.250**.....

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 **366**..... ft. to **566**..... ft., From..... ft. to..... ft.
 From..... ft. to..... ft., From..... ft. to..... ft.

GRAVEL PACK INTERVALS: From **20**..... ft. to **571**..... 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
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well **None Detected**
 Direction from well..... Distance from well.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	surface	360	375	snd fn-md, crs few sm grvl some cly
2	78	brown clay, few white calicho	375	400	snd fine-med, coarse few sm gravel
78	125	snd fine-md, few brwn rk, few ledges	400	455	sd fn-md few sm few md grvl & br rk
125	180	brown clay, limerock	455	464	brown rock
180	207	sand fine to med, coarse	464	477	brn+yllw sdstn few rd+brn cly fn sd
207	240	sand fine to small, brown clay	477	509	snd fine brwn+vllw sndstne some cly
240	288	brown clay, fine sand mixed	509	515	brown clay
288	325	sand fine to med, coarse	515	525	sand fine to few small
325	343	brown clay	525	545	sand fine, clays
343	360	sand fine to med, some coarse, clys	545	553	brown clay

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) **12/31/10**..... 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) **1/31/11**..... under the business name of **Hydro Resources**..... by (signature) *[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>.

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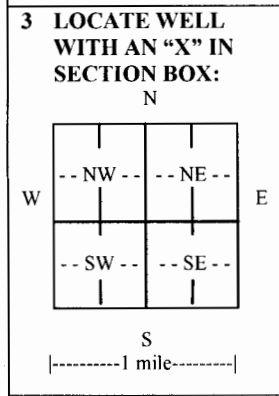
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .

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 RR#, Street Address, Box #:
 City, State, ZIP Code :



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EST. YIELD.....gpm. Well water was.....ft. after..... hours pumping..... gpm

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Direction from well Distance from well

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
553	566	sand fine			
566	571	red bed			

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Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year)
 under the business name of by (signature)

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