| WATER WELL RE  | CORD   | Form WWC-5                                   | D       | ivision of Wate  | r Resources App. N   | 0.   |  |
|--|--|--|---------|--|--|--|--|
| 1 LOCATION OF WA   |  | n .  | Secti   | on Number  |  | Range Number   |  |
| County: Stevens  | NE 1/4   | SW 4 NE 4 NW                                 |         | 6  | T 3 7 S  | R 37 □E ØW   |  |
| Street/Rural Address of  | Glob   | Global Positioning System (GPS) information: |         |  |  |  |  |
| from nearest town or intersection: If at owner's address, check here   |  |  |         | Latitude:  |  |  |  |
| 0.6 N, EAST YMFO   |  |  | Long    | Elevation: (in decimal degrees)  |  |  |  |
|  |  |  | — Datur | Datum: WGS 84, NAD 83, NAD 27  |  |  |  |
| 2 WATER WELL OWNER: JAY Myeller  |  |  | Colle   | Collection Method:   |  |  |  |
| RR#, Street Address, Box #: City, State, ZIP Code : //ugofon KS  |  |  |         | GPS unit (Make/Model:)   |  |  |  |
| thy, state, 21 code . (Augoton, KS   |  |  | Fet A   | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey  Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m |  |  |  |
| 3 LOCATE WELL  |  | £  |         |  | <u>эш, гээл, гэ</u>  | 5-15 m, [] / 15 m  |  |
| WITH AN "X" IN   |  |  |         |  |  |  |  |
| SECTION BOX:   | Depth(s) Groundwater Encountered (1)/0.5 ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL |  |         |  |  |  |  |
| WELL SSIAIR WATER LEVEL  |  |  |         | below land surface measured on mo/day/yr   |  |  |  |
| Pump test data: Well water was. 10.7 ft. after hours pumping 15 gr<br>EST. YIELDgpm. Well water was ft. after hours pumping gp   |  |  |         |  |  |  |  |
| Well water was   |  |  |         |  |  |  |  |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection well  |  |  |         |  |  |  |  |
| SW SE  | SWSF Domestic Feedlot Oil field water supply Dewatering Other (Specify below)          |  |         |  |  |  |  |
| Industrial Domestic-lawn & garden Monitoring well  |  |  |         |  |  |  |  |
| Was a chemical/bacteriological sample submitted to Department? Yes No  |  |  |         |  |  |  |  |
| S If yes, mo/day/yr sample was submitted   |  |  |         |  |  |  |  |
|  |  |  |         |  |  |  |  |
| 5 TYPE OF CASING USED: Steel PVC Other   |  |  |         |  |  |  |  |
| CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to  |  |  |         |  |  |  |  |
| Casing height above land surface. 3.0. in., Weight   |  |  |         |  |  |  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  |  |  |         |  |  |  |  |
| Steel Stainless Steel PVC Other (Specify)  |  |  |         |  |  |  |  |
|  |  |  |         |  |  |  |  |
| 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  |  |  |         |  |  |  |  |
| From   |  |  |         |  |  |  |  |
| GRAVEL PACK INTERVALS: Fromft. to  |  |  |         |  |  |  |  |
| From   |  |  |         |  |  |  |  |
| 6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☐ Bentonite ☐ Other   |  |  |         |  |  |  |  |
| What is the nearest source of possible contamination:  |  |  |         |  |  |  |  |
| Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)   |  |  |         |  |  |  |  |
| Sewer lines  | Cesspool Se  | wage lagoon Fuel stora                       | _       | Abandoned  |  |  |  |
| Direction from well  | ines Seepage pit Fe  |  |         | Oil well/gas   | s well   |  |  |
| FROM TO  | LITHOLOGIC LOG   | FROM   | TO      |  |  | GGING INTERVALS  |  |
|  | P.Soil   | 290  | 360     | medum  |  | GOING INTERVALS  |  |
| 2 20 San   | 4  | 360  | 390     |  | sand & med 6   | Crayled  |  |
| 20 90 Fine   | to melsum sand   | 390  | 400     |  | end chy  |  |  |
| 90 100 med.  | sand + caliche   |  |         |  |  | Annual of the Control |  |
| 100 110 med  | and large sand   |  |         |  |  |  |  |
|  | Ilum sand  |  |         |  |  |  |  |
|  | Sand Small gr  | avel   |         |  |  |  |  |
| 190 200 Sand   | with clan strin  | V.   |         |  |  |  |  |
| 200 260 Meds   |  |  |         |  |  |  |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 12 constructed or plugged   |  |  |         |  |  |  |  |
| under my jurisdiction and was completed on (mo/day/year) . 8.745.744 and this record is true to the best of my knowledge and belief  |  |  |         |  |  |  |  |
| Kansas Water Well Contractor's License No. 8.4.8 This Water Well Record was completed on (mo/day/year) 8 - 29 - 14   |  |  |         |  |  |  |  |
| under the business name of   | of 5. B. Prilling.   |  | by (s   | ionature)  | A maria a mari |  |  |
| 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 one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. |  |  |         |  |  |  |  |
| Telephone 785-296-5524. 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