4-18-19 WATER WELL RECORD Form WWC-5 Division of Water Resources App. No. 1 LOCATION OF WATER WELL: Fraction Section Number Township No. Range Number T 34 S R 2 DE PW County: Borber) 24 5W4SW 4SW 4SE 4 Global Positioning System (GPS) information: Street/Rural Address of Well Location; if unknown, distance & direction Latitude: (in decimal degrees) from nearest town or intersection: If at owner's address, check here \(\preceq\). Longitude: (in decimal degrees) WATER WELL OWNER: Roberta Christenson
RR#, Street Address, Box #: 1506 SE NawKins Elevation: Datum: WGS 84, NAD 83, NAD 27 Collection Method: City, State, ZIP Code Kiowa Ks 67070 LOCATE WELL 140 n 4 DEPTH OF COMPLETED WELL WITH AN "X" IN Depth(s) Groundwater Encountered (1).../QQ..... ft. (2)........... ft. SECTION BOX: WELL'S STATIC WATER LEVEL..30......ft. below land surface measured on mo/day/yr. 4/18/19..... WELL WATER TO BE USED AS: Public water supply Geothermal Injection well Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) -- SE --☐ Domestic-lawn & garden ☐ Monitoring well ☐ Irrigation ☐ Industrial 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 fin. to ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface in., Weight ft., Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: Other (Specify) ☐ Steel ☐ Stainless Steel PVC Galvanized Steel ☐ Brass ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Insecticide storage Livestock pens Other (specify below) ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage Abandoned water well Sewer lines ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard Fertilizer storage Oil well/gas well Direction from well Distance from well FROM TO LITHOLOGIC LOG FROM LITHO. LOG (cont.) or PLUGGING INTERVALS 10 halt sand + maxel 50 200 100 110 140 110

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.