WATEI	RWEL	LL RECORD	Form WV	VC-5	Division of Water Resources App. No.	
		OF WATER WELL:	Fraction		Section Number   Township No.   Range Number	
Coun	ty: Harr	per	1/4 1/4 SW	1/4 SW 1/4	16 T 34 S R 7 □E ☑W	
Street	/Rural A	ddress of Well Location; i			Global Positioning System (GPS) information:	
from	nearest t	own or intersection: If at o	owner's address, check l	here 🔲.	Latitude: .37.087236 (in decimal degrees)	
Anth	onv.S o	n Hwy179 6.4m, right/W	on SW 60 Rd 4m.SV	V 40 Ave	Longitude: -98.111236 (in decimal degrees)	
		ntrance on E side		, , _ , , , _	Elevation:	
			1.0	07.40	Datum: WGS 84, NAD 83, NAD 27	
		_ Union Or	Company/Kaup #34	07-16	Collection Method:	
	State, Z	m c 1	x 301440		☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey	
City,	State, Z	Houstor :	i, TX 77230-1440		Est. Accuracy:	
3 LOCA	ATE WE	LL				
	I AN "X'		COMPLETED WELL	.58	ft.	
SECT	ION BO	X: Depth(s) Ground	lwater Encountered	(1)	ft. (2) ft. (3) ft.	
	N WELL'S STATIC WATER LEVEL 26 ft. below land surface measured on mo/day/yr.11/21/12					
		Pump	test data: Well water	was	ft. after hours pumping gpm	
NW	/   NI	EST. YIELD	gpm. Well water	was	ft. after hours pumping gpm	
w	-   -	E   Bore Hole Diam			t., andft.	
					er supply    Geothermal    Injection well	
SW	swse 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						
S If yes, mo/day/yr sample was submitted						
<u>'</u>		water wen dishi				
5 TYPE OF CASING USED: Steel PVC Other						
CASING JOINTS: Glued Clamped Welded Threaded						
CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 2 in to 38 ft., Diameter in to ft., Diameter in to ft.						
Casing height above land surface. 32 in, Weight lbs:/ft, Wall thickness or gauge No.						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
Steel Stainless Steel Other (Specify)						
Brass Galvanized Steel None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:						
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 58 ft. to 38 ft., From ft. to ft.						
From ft. to ft., From ft. to ft.						
GRAVEL PACK INTERVALS: From 58 ft. to 20 ft., From ft. to ft.						
From						
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other						
Grout Intervals: From .20 ft. to .0 ft., From ft. to ft., From ft., From 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 ☐ Cesspool ☐ Feedyard ☐ Fertilizer storage ☑ Oil well/gas well ☐ Feedyard ☐ Feedya						
		nt sewer lines 🔲 Seepage p		_	orage 🗹 Oil well/gas wellfrom well	
FROM	TO	n well		FROM	TO LITHO. LOG (cont.) or PLUGGING INTERVALS	
0	5	Red Clay	10 1000	TATOM	EITHO. EOG (COIL.) OF TEOGGING INTERVALS	
5	10	Red Clay		<del></del>		
10	20	Red Clay				
20	30	Red Clay/Blue Clay			Profesion 1	
30	40	Red Clay/Blue Clay			11 & Corn Carl Burn W Brance Band	
	50	Shale	· · · · · · · · · · · · · · · · · · ·		D.C. O. O. A	
40					——————————————————————————————————————	
50	60	Shale			/// N. B. Suite	
					BUREAU OF WATER	
	<u> </u>					
T CONTRACTORIS OR LANDOWNERS CERTIFICATION. The state of						
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) .11/21/12 and this record is true to the best of my knowledge and belief.						
under my jurisdiction and was completed on (mo/day/year)						
Kansas Water Well Contractor's License No. 665. This Water Well Record was completed on (mo/daw/yedf) 11/27/12 under the business name of Pratt Well Service, 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 confect 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						