| WATE | R WEI | L RECORD | Form W | WC-5 | Di | vision of Wate | r Resources App. No | _{5.} L | | |
|--|--|----------------------------------|------------------------|-------------|--|--|-----------------------|-----------------|----------------|--|
| | | OF WATER WELL: | Fraction | | Section | on Number | Township No. | Range Nu | ımber | |
| County: Rawlins | | | SW 1/4 NW 1/4 NE | | | 8 | T 3 S | | □E ☑W | |
| | | Address of Well Location; | | Globa | Global Positioning System (GPS) information: | | | | | |
| from nearest town or intersection: If at owner's address, check here | | | | | Land | Latitude: .39.81300 (in decimal degrees) Longitude: 101.04185 (in decimal degrees) | | | | |
| 402 Grant Street, Atwood, NS | | | | | | Elevation: 2846.47 | | | | |
| 2 WATER WELL OWNER: 1 arry Aktrich | | | | | | | 4, 🗹 NAD 83, 🗌 | NAD 27 | | |
| 2 WATER WELL OWNER: Larry Aldrich RR#, Street Address, Box #: 402 Grant Street | | | | | | Collection Method: GPS unit (Make/Model:) | | | | |
| City, State, ZIP Code : Atwood, KS, 67730 | | | | | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | | |
| Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m | | | | | | | | | | |
| 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 30 | | | | | | | | | | |
| | SECTION BOX: Depth(s) Groundwater Encountered (1).22 | | | | | | | | | |
| | N WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr | | | | | | | | | |
| Pump test data: Well water wasft. after | | | | | | | | | | |
| w NV | | | | | | | | | | |
| | | | | | | | | | | |
| SW SE Domestic Feedlot Oil field water supply Dewatering Other (Specify below) | | | | | | | | | | |
| ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well Air Sparce Well Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No | | | | | | | | | | |
| was a chemical/bacteriological sample submitted to Department? S If yes, mo/day/yr sample was submitted | | | | | | | | | | |
| 1 mile Water well disinfected? Yes No | | | | | | | | | | |
| 5 TYPE OF CASING USED: Steel PVC Other | | | | | | | | | | |
| CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | | |
| Casing diameter .2 | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | |
| ☐ 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 | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | ft., From | ft. | to | ft. | |
| | OICA V | LLTACK INTERVALS. | From | ft. to | | ft., From | | to | ft | |
| From ft. to ft., From ft. to ft. 6 GROUT MATERIAL: □ Neat cement □ Cement grout ✓ Bentonite □ Other □ Grout Intervals: From 3 ft. to ft., From ft. to ft., From ft. to ft. | | | | | | | | | | |
| Grout Intervals: From .3 | | | | | | | | | | |
| 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 LUST site | | | | | | | | | |
| Direction from well Distance from well FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC NOT PLUGGING INTER | | | | | | | | | | |
| 0 | 20 | Fill | ne Loo | TROW | 10 | LITTIO, L | od (cont.) of 1 LC | OGINO | VIERVALS | |
| 20 | 28 | Clay, Silty | | | | | | | | |
| 28 | 30 | Fine to Medium Sand | | | | AS12 | | | | |
| | | | | | | KDUE ID | 4 0050555 | | | |
| | | | | | | KDHE ID | 7 0050555 | | | |
| | | | | | | - | | | | |
| | | | | | | | | , | | |
| | | | | | - | | | | | |
| 7 CONTRACTORIS OR LANDOWNERS CERTIFICATION. TO | | | | | | | | | | |
| 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) .7/15/2014 and this record is true to the best of my knowledge and belief. | | | | | | | | | | |
| Kansas Water Well Contractor's License No. 594 This Water Well Record was completed on (mo/day/year) 10/9/2014. | | | | | | | | | | |
| under th | e busine | ss name of Coranco Gr | eat Plains, Inc. | | by (s | signature) | Jany J | | | |
| INSTRUC | CTIONS: | Use typewriter or ball point per | n. PLEASE PRESS FIRMLY | and PRINT c | early. Ple | ase fill in blanks | and check the correct | answers. Sen | nd 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 | | | | | | | | | | |