

WATER WELL RECORD Form WWC-5

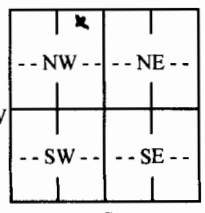
Original Record Correction Change in Well Use

Division of Water Resources App. No.

Well ID

1 LOCATION OF WATER WELL: County: <u>RAWLINS</u>	Fraction <u>N 7/8 W 1/4 NW 1/4 NE 1/4 SW 1/4</u>	Section Number <u>5</u>	Township Number <u>T 3 S</u>	Range Number <u>R 33 E W</u>
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2 WELL OWNER: Last Name: <u>HORNER</u> First: <u>BERNARD</u> Business Address: <u>705 N 5TH ST.</u> City: <u>ATWOOD</u> State: <u>KS</u> ZIP: <u>67730</u>	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input type="checkbox"/> <u>NW CORNER of ATWOOD</u>
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3 LOCATE WELL WITH "X" IN SECTION BOX: N  W E S -----1 mile-----	4 DEPTH OF COMPLETED WELL: <u>25</u> ft. Depth(s) Groundwater Encountered: 1) <u>10</u> ft. 2) <u> </u> ft. 3) <u> </u> ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: <u>10</u> ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr)..... <input type="checkbox"/> above land surface, measured on (mo-day-yr)..... Pump test data: Well water was <u> </u> ft. after..... hours pumping gpm Well water was <u> </u> ft. after..... hours pumping gpm Estimated Yield: <u>20</u> gpm Bore Hole Diameter: <u>9</u> in. to <u>2.5</u> ft. and in. to ft.	5 Latitude: (decimal degrees) Longitude: (decimal degrees) Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper:
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7 WELL WATER TO BE USED AS:		
1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input checked="" type="checkbox"/> Livestock <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID 6. <input type="checkbox"/> Dewatering: how many wells? 7. <input type="checkbox"/> Aquifer Recharge: well ID 8. <input type="checkbox"/> Monitoring: well ID 9. Environmental Remediation: well ID <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease 11. Test Hole: well ID <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify):

Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:

Water well disinfected? Yes No

8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other		CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded	
Casing diameter <u>5</u> in. to <u>2.5</u> ft., Diameter in. to ft., Diameter in. to ft.		Casing height above land surface <u>12</u> in. Weight <u>2.50</u> lbs./ft. Wall thickness or gauge No. <u>2.50</u>	
TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE: <input checked="" type="checkbox"/> Continuous Slot <input type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole)			
SCREEN-PERFORATED INTERVALS: From <u>10</u> ft. to <u>25</u> ft., From ft. to ft., From ft. to ft.			
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>25</u> ft., From ft. to ft., From ft. to ft.			

9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other	
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From ft. to ft., From ft. to ft.	
Nearest source of possible contamination: <input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input checked="" type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage <input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input type="checkbox"/> Sewage Lagoon <input type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well <input type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well <input type="checkbox"/> Other (Specify)	
Direction from well? <u>NE</u> Distance from well? <u>100</u> ft.	

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	6	Top soil			
6	23	Shovel			
23	25	Shale			
Notes:					

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 8-25-16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 376 This Water Well Record was completed on (mo-day-year) 8-25-16 under the business name of B. B. Quilling, LLC

INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) 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) 296-3565.