

WATER WELL RECORD

Form WWC-5

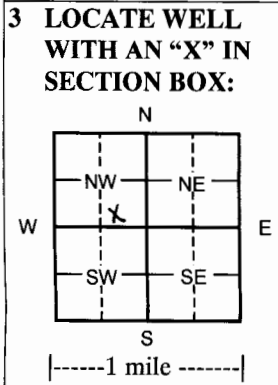
Division of Water Resources App. No. 20100517

1 LOCATION OF WATER WELL: Cheyenne	Fraction NE ¼ SW ¼ SE ¼ NW ¼	Section Number 8	Township Number T 3 S	Range Number R 41 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
---	--	----------------------------	---------------------------------	--

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .
7 miles west and 5 north from St. Francis

2 WATER WELL OWNER: Kary Zwegardt
RR#, St. Address, Box # **2221 Birch**
City, State, ZIP Code **St. Francis, KS 67756**

Global Positioning System (GPS) information:
Latitude: _____ (in decimal degrees)
Longitude: _____ (in decimal degrees)
Elevation: _____
Datum: WGS 84, NAD 83, NAD 27
Collection Method:
 GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m



4 DEPTH OF COMPLETED WELL **230** ft.
Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
WELL'S STATIC WATER LEVEL **NA** ft. below land surface measured on mo/day/yr _____
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
EST. YIELD _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 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
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 **4.5** in. to **190** ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface **18** in., Weight **2.38** lbs./ft. Wall thickness or gauge No. **.248**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 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 **190** ft. to **230** ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From **20** ft. to **230** ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
Grout Intervals From **0** ft. to **20** ft. From _____ ft. to _____ ft. From _____ ft. to _____ 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 **None**

Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Surface	142	153	Fine sand & sandy clay w/clay
2	26	Loess	153	156	Caliche
26	63	Clay w/caliche strks	156	164	Caliche w/clay strks
63	86	Clay & caliche w/fine sand & sandstone Strks	164	180	Fine & med sand w/clay & caliche strks
			180	209	Fine & med sand w/clay & caliche lenses
86	102	Fine to some med sand w/clay & caliche Lenses	209	225	Fine to some med sand w/clay & caliche
			225	240	Yellow ochre/black shale
102	110	Caliche w/sandstone strks			
110	120	Caliche & clay w/sandstone			
120	142	Sandstone w/clay & caliche strks			

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) 12-15-10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 of 783. This Water Well Record was completed on (mo/day/year) 12-31-10 under the business name of Woofter Pump & Well Inc. by (signature) [Signature]

INSTRUCTIONS: Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one 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>.



ASSIGNMENT OF WATER WELL TO LANDOWNER

COPY

I, Kary Zwegardt of 314 E. Jackson Street
(Landowner's address)

St. Francis, KS 67756 am the landowner on which a water well is located in
(City) (State)
the SW quarter of the SE quarter of the NW quarter in Section 8, Township 3S,
Range 41 ~~NW~~ SW, in Cheyenne County, Kansas which is approximately
2,280 feet ~~north/south~~ and 1,660 feet ~~east~~ west of the apparent NW section
corner. The water well was drilled in December, 2010 (month/year).

I hereby request that Mid-Continent Energy Operating Company leave the water well,
(Operator name)

which was drilled by Temporary Water Permit # 2010051700, unplugged, and I will
assume all responsibility for the plugging of said water well in accordance with the requirements
of the Kansas Department of Health and Environment regulation K.A.R. 28-30-7.

LANDOWNER:
[Signature] 8/25/11
(Signature) (Date)
Kary Zwegardt
(Print)

OPERATOR:
[Signature] 8/2/2011
(Signature) (Date)
By: G. M. Canaday
(Agent)

IF ADDITIONAL LANDOWNER

(Signature) (Date)

(Print)

RECEIVED
AUG 29 2011
BUREAU OF WATER