

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

Well ID

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL: County: Graham	Fraction $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 30	Township Number T 6 S	Range Number R 23 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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2 WELL OWNER: Last Name: Niblock First: Paul Business Address: 1880 CR O Address: Colby State: KS ZIP: 67701	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"/> Int. of 230th Ave & Rd Z Approx 4865' N & 2247' W
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3 LOCATE WELL WITH "X" IN SECTION BOX: N <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr><td> </td><td>X</td><td> </td></tr> <tr><td>--NW--</td><td>--NE--</td><td> </td></tr> <tr><td>W</td><td> </td><td>E</td></tr> <tr><td>--SW--</td><td>--SE--</td><td> </td></tr> <tr><td> </td><td>S</td><td> </td></tr> </table> S 1 mile		X		--NW--	--NE--		W		E	--SW--	--SE--			S		4 DEPTH OF COMPLETED WELL: 175 ft. Depth(s) Groundwater Encountered: 1) ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ft. <input 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 ft. after..... hours pumping gpm Well water was ft. after..... hours pumping gpm Estimated Yield: gpm Bore Hole Diameter: 1.1 in. to 180 ft. and in. to ft.	5 Latitude: 39.508167 (decimal degrees) Longitude: 99.927417 (decimal degrees) Horizontal Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input checked="" type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input checked="" type="checkbox"/> GPS (unit make/model: Garmin Montana 650T) (WAAS enabled? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: 6 Elevation: 2437 ft. <input type="checkbox"/> Ground Level <input checked="" type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input checked="" type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other
	X																
--NW--	--NE--																
W		E															
--SW--	--SE--																
	S																

7 WELL WATER TO BE USED AS:

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input checked="" type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <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):
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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: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded
 Casing diameter **5** in. to **175** ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface in. Weight **2.89** lbs./ft. Wall thickness or gauge No. **0.258**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel Fiberglass PVC Other (Specify)
 Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)
 Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From **155** ft. to **175** ft., From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From **20** ft. to **175** ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
 Grout Intervals: From **0** ft. to **20** ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:
 Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage
 Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well
 Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well
 Other (Specify)

Direction from well? Distance from well? ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	surface	130	145	fine to med sand & gravel w/ clay lens
2	15	loess	145	173	med sand & gravel (semi loose)
15	29	clay	173	174	flint
29	34	clay & caliche	174	177	yellow ochre
34	70	sandstone & caliche	177	178	flint
70	81	fine to med sand & some gravel	178	180	yellow ochre
81	102	clay w/ sandstone strks	Notes:		
102	116	clay w/ sand strks			
116	130	clay & caliche			

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) **10-31-16** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **838** This Water Well Record was completed on (mo-day-year) **11-10-16** under the business name of **RMD Drilling & Well Service, LLC** Signature *[Signature]*