

94 **WATER WELL RECORD Form WWC-5**

Division of Water Resources App. No.   Well ID **TH-3-19**

Original Record  Correction  Change in Well Use

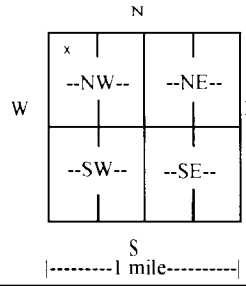
**1 LOCATION OF WATER WELL:** Fraction **SE 1/4 NW 1/4 NW 1/4** Section Number **3** Township Number **T 7 S** Range Number **R 8 E W**

County: Mitchell

**2 WELL OWNER:** Last Name: **Mitchell Co. RWD #3** First:   
Business: **Mitchell Co. RWD #3**  
Address: **2031 N. Independence Ave.**  
Address:   
City: **Beloit** State: **KS** ZIP: **67420**

Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): **Approximately 1 mile north and 5 miles west of Beloit.**

**3 LOCATE WELL WITH "X" IN SECTION BOX:**



**4 DEPTH OF COMPLETED WELL:** 53 ft.  
Depth(s) Groundwater Encountered: 1)  ft.  
2)  ft. 3)  ft., or 4)  Dry Well  
WELL'S STATIC WATER LEVEL: 17.78 ft.  
 below land surface, measured on (mo-day-yr) **01-29-19**  
 above land surface, measured on (mo-day-yr)   
Pump test data: Well water was not checked ft.  
after  hours pumping  gpm  
Well water was  ft.  
after  hours pumping  gpm  
Estimated Yield:  gpm  
Bore Hole Diameter: **5** in. to **55** ft. and  in. to  ft.

**5 Latitude:** 39.479057 (decimal degrees)  
**Longitude:** -98.207488 (decimal degrees)  
Horizontal Datum:  WGS 84  NAD 83  NAD 27  
Source for Latitude/Longitude :  
 GPS (unit make/model: )  
(WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper:  
**6 Elevation:** Unknown ft.  Ground Level  TOC  
Source:  Land Survey  GPS  Topographic Map  
 Other

**7 WELL WATER TO BE USED AS:**  
1. Domestic:  Household  Lawn & Garden  Livestock  
2.  Irrigation  
3.  Feedlot  
4.  Industrial  
5.  Public Water Supply: well ID   
6.  Dewatering: how many wells?   
7.  Aquifer Recharge: well ID   
8.  Monitoring: well ID   
9. Environmental Remediation: well ID   
 Air Sparge  Soil Vapor Extraction  
 Recovery  Injection  
10.  Oil Field Water Supply: lease   
11. Test Hole: well ID **TH-3-19**  
 Cased  Uncased  Geotechnical  
12. Geothermal: how many bores?  
a) Closed Loop  Horizontal  Vertical  
b) Open Loop  Surface Discharge  Inj. of Water  
13.  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:**  Steel  PVC CASING JOINTS:  Glued  Clamped  Welded  Threaded  Other  
Casing diameter **2** in. to **41** ft., Diameter in. to  ft., Diameter in. to  ft.  
Casing height above land surface **24** in. Weight **.73** lbs./ft. Wall thickness or gauge No. **.214**  
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 **41** ft. to **51** ft., From  ft. to  ft., From  ft. to  ft.  
GRAVEL PACK INTERVALS: From **20** ft. to **55** 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) **None Known**

Direction from well?		Distance from well?		ft.	
10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	Topsoil			
1	11	Clay, dark brown			
11	21	Clay, brown and gray			
21	22	Sandstreak			
22	26	Clay, gray and brown			
26	40	Sand, very fine to fine			
40	41	Sand, very fine to medium			
41	51	Sand & gravel, fine to coarse, with small rock			
51	55	Shale, black			

Notes:

**II CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo-day-year) **01-29-19** and this record is true to the best of my knowledge and belief.  
Kansas Water Well Contractor's License No. **185** This Water Well Record was completed on (mo-day-year) **02-08-19**  
under the business name of **Clarke Well & Equipment, Inc.** Signature