

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

Well ID TH-8-19

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL:

County: Mitchell

Fraction SE 1/4 NW 1/4 NW 1/4

Section Number 3

Township Number T 7 S

Range Number R 8 E W

2 WELL OWNER: Last Name:

Business: Mitchell Co. RWD #3

Address: 2031 N. Independence Ave.

Address:

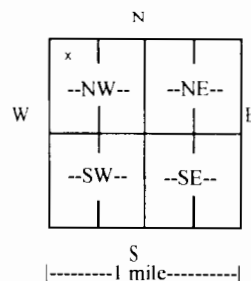
City: Beloit

State: KS ZIP: 67420

First:

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: 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: 18.46 ft.
 below land surface, measured on (mo-day-yr) 02-04-19
 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 56 ft. and in. to ft.

5 Latitude: 39.479285 (decimal degrees)

Longitude: -98.208009 (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-8-19
 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 56 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, brown			
11	28	Clay, brown, silty			
28	30	Clay, brown, soft, with sand, very fine			
30	41	Clay, brown, soft			
41	51	Sand, fine to coarse, with gravel, fine to coarse, rock			
51	56	Shale, gray			

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) 02-04-19 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

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.