| WATER WELL RECORD | | | Form W | WC-5 | Division of Water Resources App. No. | | | | |
|--|--|------------------------------------|--|--|---|---------------------------------|---------------------------------------|---|--|
| 1 LOCATION OF WATER WELL: County: GRAHAM | | Fraction 1/4 NW 1/4 NE 1/4 NE 1/4 | | Section Number Township No. Range Number 13 T 8 S R 23 □E ☑W | | | | | |
| | | | f unknown, distance & | Global Positioning System (GPS) information: | | | | | |
| from n | from nearest town or intersection: If at owner's address, check here . | | | | | Latitude: (in decimal degrees) | | | |
| 1/4 E | 1/4 EAST OF HILL CITY ON HWY 24 | | | | | Longitude: (in decimal degrees) | | | |
| | | | | | | Elevation: | | | |
| 2 WAT | ER WELL O | WNER: LONNIE | GARRISON | | Collection | | 4, [] NAD 83, [] | NAD 21 | |
| RR#, : | RR#, Street Address, Box #: 2592 275TH AVE | | | | | GPS unit (Make/Model:) | | | |
| ari ari ama a i | | | TY KS 67642 | | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey | | | | |
| 3 TOO!! | CHICA WW. FRED DE | | | | Est. Accui | racy: | 3 m, ☐ 3-5 m, ☐ | 5-15 m, □ >15 m | |
| 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 64 | | | | | | | | | |
| | SECTION BOX: Depth(s) Groundwater Encountered (1).30 ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL.30 ft. below land surface measured on mo/day/yr.04-26-12 ft. | | | | | | | | |
| | | | | | | | | | |
| | Pump test data: Well water wasft. after hours pumping | | | | | | | ping gpm | |
| NW | NE | EST. YIELD. 50 | gpm. Well water wasft. after hours pumping gpm | | | | | | |
| W E Bore Hole Diameter 1.0in. to .04ft., andin. | | | | | | | | | |
| WELL WATER TO BE USED AS: ☐ Public wat | | | | | | | | | |
| SW - | SWSE Domestic Feedlot Oil field water supply Dewatering Other (Specify below) | | | | | | | | |
| ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well | | | | | | | | | |
| S If yes, mo/day/yr sample was submitted to Department? Yes No | | | | | | | | | |
| Water well disinfected? \[\subseteq \text{Yes} \subseteq \text{No} \] | | | | | | | | | |
| 5 TYPE OF CASING USED: Steel V PVC Other | | | | | | | | | |
| CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | |
| Casing diameter .5 in. to .64 ft., Diameter in. to ft., Diameter in. to ft. | | | | | | | | | |
| Casing height above land surface. 18 in., Weight .160 lbs./ft., Wall thickness or gauge No. | | | | | | | | | |
| 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 | | | | | | | | | |
| From ft., from ft., ft. to ft. | | | | | | | | | |
| GRAVEL PACK INTERVALS: From64 ft. to25 ft., From ft. to ft. | | | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | | | |
| 6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other | | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | | |
| Septic tank | | | | | | | | | |
| Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well | | | | | | | | | |
| □ Watertight sewer lines □ Seepage pit □ Feedyard □ Fertilizer storage □ Oil well/gas well □ Direction from well □ Distance from well | | | | | | | | | |
| | | LITHOLOG | | | from well. | TTHO I | OC (t) DLI | ICCINIC DITTEDIZAL C | |
| FROM 5 | TO SUBI | FACE CLAY | IC LOG | FROM | TO L | ainu. L | oo (com.) or PLU | UGGING INTERVALS | |
| | | SAND | | | | | | | |
| | | SAND | | | | | | | |
| | | TO LARGE SANI |) | | | | | | |
| 64 | SHAL | | | | | | | | |
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| 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) .04-26-12 and this record is true to the best of my knowledge and belief. | | | | | | | | | |
| Kansas Water Well Contractor's License No. 444 This Water Well Record was completed on (mo/day/year) 04-26-12 | | | | | | | | | |
| INSTRUCTIONS: Use ty pewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies | | | | | | | | | |
| (white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. | | | | | | | | | |
| Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Vi sit us at http://www.kdheks.gov/waterwell/index.html. | | | | | | | | | |
| KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy | | | | | | | | | |
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