

Please line thru this no on your copies *This is a Domestic well*

WATER WELL RECORD

Form WWC-5

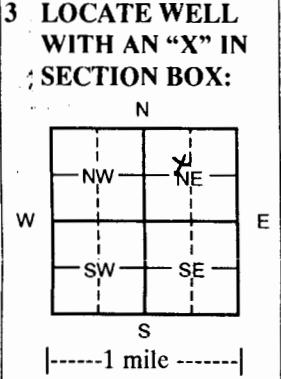
Division of Water Resources App. No. 47906

1 LOCATION OF WATER WELL: Fraction Sheridan $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$ Section Number 9 Township Number T 8 S Range Number R 27 E W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .
6 miles east of Hoxie—Hwy 24 & 1.5 east

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

2 WATER WELL OWNER David Niermeier
 RR#, St. Address, Box # 1552 E Rd 40 N
 City, State, ZIP Code Hoxie, KS 67740



4 DEPTH OF COMPLETED WELL 190 ft.
 Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
 WELL'S STATIC WATER LEVEL _____ 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 150 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 150 ft. to 190 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 190 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	87	88	Caliche 88-95 Clay, fine sand & caliche str
2	23	Loess	95	98	Caliche-semi hard 98-105 Clay & sand strk
23	25	Fine loose sand	105	108	Med sand 108-113 caliche & sand strks
25	38	Fine sand & clay layers	113	120	Med sand, clay strks
38	39	Caliche	120	128	Caliche & sand layers 128-132 clay & sand
39	47	Clay & caliche strls soft	132	146	Med sand, clay lenses 146-155 Clay
47	58	Clay caliche & sand strks	155	168	Med loose sand, clay lenses
58	70	Fine sand & clay layers	168	175	Clay 175-185 med loose sand
70	81	Med sand clay layers	185	190	Clay
81	87	Clay & caliche lens			

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) 6/20/11 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 554. This Water Well Record was completed on (mo/day/year) 8/15/11
 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>.