WATER	R WEI	LL RECORD	Form W	WC-5	Div	Division of Water Resources App. No.				
1 LOCATION OF WATER WELL:			Fraction		Section Number   Township No.   Range Number					
County: Graham			1/4 SW 1/4 SV		7	T 9 S	R 23	DE ZW		
Street/Rural Address of Well Location; if unknown, distance & direction						Positionino	System (GPS) in			
from nearest town or intersection: If at owner's address, check here .						Latitude:				
1		Line and 276' from S line		- August -		Longitude: (in decimal degrees)				
oo nom it mad dad 215 nom o mio						Elevation				
A 487 V LILLER ARESTA X CARLETAINS						: □ WGS 84	1, □ NAD 83, □	NAD 27		
2 WATER WELL OWNER: Rick Roberts						Collection Method:				
RR#, Street Address, Box #: 3101 US Hwy 24 City, State, ZIP Code : Hill City, KS 67642						GPS unit (Make/Model:)				
City,	State, Z	IP Code : Hill City	, KS 67642		☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey					
3 LOCA	1 THE 2 WHEN				Est. Ac	curacy: [ ] <	3 m, □ 3-5 m, □	5-15 m,	☐>15 m	
		A NEPTHOE	CAPAGOR BUTTON ARISES	* 84		c				
1	WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1) ft (2) ft (3)									
SECTION BOX: Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr									ft.	
l —		Pumr	test data: Well met	t. Delow I	ft. after hours pumpinggpm					
FST VIFID gram Wall water was						ft. after hours pumping gpm				
W - NW - NE - EST. YIELD gpm. Well water was						nours pumping gpm				
WELL WATER TO BE USED AS: C7 Public water						er supply    Geothermal    Injection well				
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well  Swanning Domestic Feedlot Oil field water supply Dewatering Other (Specify below)									ven	
swse   Domestic   Feedlot   Oil field water supply   Dewatering   Other (Specify below)   Irrigation   Industrial   Domestic-lawn & garden   Monitoring well   Mon										
Was a chemical/bacteriological sample submitted to Department? Yes V No										
S 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 5 in to 84 ft., Diameter in to ft., Diameter in to ft.										
Casing height above land surface 24 in, Weight 2.89 lbs./ft., Wall thickness or gauge No. 0.258										
TIPE 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 wranged Z Saw cut Cother (creedity)										
SCREEN-PERFORATED INTERVALS: From 64 ft. to 84 ft., From ft. to ft.										
From the first to										
GRAVEL PACK INTERVALS: From 20 ft. to 64 ft., From ft. to ft.										
From ft. to ft. From ft. to										
6 GROUT MATERIAL:   Neat cement   Cement grout   7 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:										
Soptic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)										
Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well									,	
		nt sewer lines	it Feedyard	Fertilizer:		☐ Oil well/ga:		*** *** *** ***	******	
Direct	ion from	n well	**************************************			<u> </u>	** *** *** *** *** *** ***		*********	
FROM	TO	LITHOLOG	IIC LUG	FROM	TO	LITHO, LC	OG (cont.) <u>or</u> PLU	GGING I	NTERVALS	
	2	<u>Surface</u>					***************************************	PP-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
	20	Loess							****	
	57	Fine to med sand								
	62	Clay								
	78	Fine to some med sand	1						The state of the s	
78	84	Brown & black shale								
ļ										
<u> </u>							-			
									***************************************	
								·+····································		
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) 4/13/13 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) 4/26/13 under the business name of _D&R Pump Service by (signature)										
under the	busines	s name of U&R Pump	Service		by (sig	onature)	1 South			
INSTRUC	TIONS:	Use tv pewriter or ball point pen	. PLEASE PRESS FIRML:	Y and PRINT of	early Dleso	e fill in blanks	and abook the correct	answers.	Send three copies	
(white, blue	e, pink) to	Kansas Depar tment of Health	and Environment, Bureau	of Water Geol	nav Section	1000 SW Jac	keon St. Snite 420 T	oneka Vo	anna 666 10 1267	
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										
					CIIC		$\mathbb{L}_{\mathcal{O}} \cup \mathcal{O}_{\mathcal{P}}^{y}, \sqsubseteq \mathcal{O}_{\mathcal{U}}^{u}$	v copy,	in runk coby	