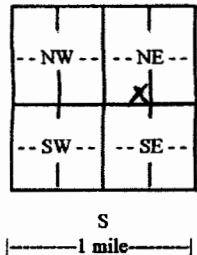


WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Graham	Fraction ¼ SE ¼ SW ¼ NE ¼	Section Number 6	Township No. T 9 S	Range Number R 25 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> Int. of Hwy 24 & 130th Ave. approx. 4mi S & 1/2 mi W. 1336 from E and 2030 from N		Global Positioning System (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
2 WATER WELL OWNER: Albert Goetz RR#, Street Address, Box #: 5042 E Co Rd 130S City, State, ZIP Code : Park, KS 67751				

3 LOCATE WELL WITH AN "X" IN SECTION BOX: N  W E S 1 mile	4 DEPTH OF COMPLETED WELL 100' ft. Depth(s) Groundwater Encountered (1)..... ft (2)..... ft (3)..... ft. WELL'S STATIC WATER LEVEL 51' 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 Bore Hole Diameter 8.5..... in. to 100..... ft., and in. to ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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5 TYPE OF CASING USED: Steel PVC Other.....

CASING JOINTS: Glued Clamped Welded Threaded
 Casing diameter 4.5..... in. to 100..... ft., Diameter..... in. to ft., Diameter..... in. to ft.
 Casing height above land surface 30..... in., Weight 2.5..... lbs./ft., Wall thickness or gauge No. 0.248.....

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 80..... ft. to 100..... ft., From..... ft. to ft.
 GRAVEL PACK INTERVALS: From 20..... ft. to 100..... 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.....
 Direction from well Distance from well

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Surface	85	92	Sandstone with sand str
2	10	Loess	92	100	Black shale
10	21	Cemented sand			
21	42	Clay with fine sand str			
42	46	Fine sand			
46	52	Cemented sand			
52	61	Clay			
61	75	Fine sand with clay str			
75	81	Fine to some med sand with clay len			
81	85	Cemented sand			

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) 7/31/12..... 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) 7/23/12.....
 under the business name of D&R Pump Service, LLC by (signature) *D. R. Smith*

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. 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 785-296-5524. Send one copy 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>.