

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>CLAY</u>	Fraction <u>SE SE SW NW</u> <u>3/4 1/4 SW 1/4 SW 1/4</u>	Section Number <u>19</u>	Township Number T <u>10 S</u>	Range Number R <u>4 W</u>
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Distance and direction from nearest town or city street address of well if located within city? FROM WINTERFORD: 1 MILE W. WSO, 2 MILES SOUTH AND 1/2 EAST

Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: 39 10.191
 Longitude: 97 01.905
 Elevation: 1152
 Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: MR. WAYNE KENT
 RR#, St. Address, Box # : 1923 4th Rd
 City, State, ZIP Code : WAKEFIELD, KS 67487

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N	
--NW--	--NE--
--SW--	--SE--
S	

W E

| **X** |

4 DEPTH OF COMPLETED WELL 161 ft.

Depth(s) Groundwater Encountered (1) 58 ft. (2) _____ ft. (3) _____ ft.
 WELL'S STATIC WATER LEVEL 57 ft. below land surface measured on mo/day/yr 9/14/06
 Pump test data: Well water was _____ ft. after _____ hours pumping gpm
 Est. Yield B gpm: Well water was _____ ft. after _____ hours pumping gpm
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X _____; If yes, mo/day/yr
 Sample was submitted Water well disinfected? Yes X No _____

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued <u>X</u> Clamped _____
<u>2 PVC</u>	4 ABS	7 Fiberglass		Welded _____
				Threaded _____

Blank casing diameter 5 in. to 61 ft., Diameter 5 in. to 151 ft., Diameter _____ in. to _____ ft.
 Casing height above land surface 24 in., Weight _____ lbs./ft. Wall thickness or gauge No. SDR21

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<u>PVC</u>	9 ABS	11 Other (Specify) _____
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<u>3 Mill slot</u>	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From 61 ft. to 71 ft., From _____ ft. to _____ ft.
 From 151 ft. to 161 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 25 ft. to 161 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other _____

Grout Intervals: From 3 ft. to 25 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	<u>6 Other</u> (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well	<u>EXISTING WELL</u>

Direction from well? SOUTH How many feet? 50

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>18</u>	<u>CLAY, BROWN</u>			
<u>18</u>	<u>57</u>	<u>SHALE, BROWN</u>			
<u>57</u>	<u>65</u>	<u>LEAMSTONE, H2O</u>			
<u>65</u>	<u>87</u>	<u>SHALE, GRAY</u>			
<u>87</u>	<u>90</u>	<u>LEAMSTONE</u>			
<u>90</u>	<u>161</u>	<u>SHALE, GRAY TURNED TO GRAY</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9/14/06 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 760 This Water Well Record was completed on (mo/day/year) 10/9/06
 under the business name of ASSOCIATED DRILLING INC by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies 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. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.