WATER WELL RECORD **Form WWC-5** Division of Water Resources App. No. _____

1 LOCATION OF WATER WELL: County: Smith
Fraction: ¼ ¼ ¼ SW ¼
Section Number: 17
Township No.: T 2 S
Range Number: R 12 ☐E ☒W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐.

Global Positioning System (GPS) information:
Latitude: 39° 52' 40.3" (in decimal degrees)
Longitude: 98° 42' 34.5" (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: Brandon Hommon
RR#, Street Address, Box #: 300 Maple St
City, State, ZIP Code : Lebanon, KS 66952

3 LOCATE WELL WITH AN "X" IN SECTION BOX:

N
W | -- NW -- | -- NE -- | E
X -- SW -- | -- SE --
S
|---------1 mile---------|

4 DEPTH OF COMPLETED WELL 106 ft.
Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL 62 ft. below land surface measured on mo/day/yr.....
Pump test data: Well water was.....ft. after..... hours pumping..... gpm
EST. YIELD 25 gpm. Well water was.....ft. after..... hours pumping..... gpm
Bore Hole Diameter 10 in. to .....ft., and .....in. to .....ft.
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 5 in. to 86 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface..... in., Weight .....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 86 ft. to 106 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 20 ft. to 60 ft., From ..... ft. to ..... ft.
From 70 ft. to 106 ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....
Grout Intervals: From 0 ft. to 20 ft., From 60 ft. to 70 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
Old Wind Mill
Direction from well 50' South Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	20	Topsoil and Brown Clay			
20	40	Sandy Brown Clay			
40	60	Brown Sandy Clay with Sandstone & fine Sand layer			
60	80	Tan Clay with Sandstone Strips & white Shale Strips			
80	100	Med. Sandstone with fine gravel to Med. gravel			
100	105	Med. Sandstone, with fine to Med. gravel			
105	110	Shale & Limestone			

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) 8-15-13 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 443K (433) This Water Well Record was completed on (mo/day/year) 1-3-14 under the business name of Sargent Irrigation by (signature) [signature]

INSTRUCTIONS: Use typewriter or ball point pen. *PLEASE PRESS FIRMLY* and *PRINT* clearly. Please fill in blanks and check the correct answers. Send one copy 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

KSA 82a-1212