

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Lyon	Fraction SW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number 15	Township Number T 19 S	Range Number R 11 E W
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Distance and direction from nearest town or city street address of well if located within city?
SE corner of Second Ave. and West St., Emporia, KS

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

2 WATER WELL OWNER: KDHE DCFRTF
RR#, St. Address, Box # 1000 SW Jackson, Suite 410
City, State, ZIP Code Topeka, KS 66612

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

	--NW--	--NE--	
W			E
	--SW--	--SE--	
	S		

4 DEPTH OF COMPLETED WELL 41.95 ft.

Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
WELL'S STATIC WATER LEVEL 31.06 ft. below land surface measured on mo/day/yr 12-08-06
 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: 5 Public water supply 8 Air conditioning 11 Injection well
 1 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 _____ No **X**

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
7 PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing diameter $\frac{2}{27}$ in. to _____ ft., Diameter. _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface 0 in., Weight _____ lbs./ft. Wall thickness or guage No. SCH40

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass **7** PVC 9 ABS 11 Other (Specify) _____
 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot **3** Mill slot 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 41.95 ft. to 27 ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 41.95 ft. to 24.4 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3** Bentonite 4 Other _____
 Grout Intervals: From 24.4 ft. to 0 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 16 Other (specify)
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well
 Direction from well? N/A How many feet? N/A

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2.5	Dark brown clay	41.95	24.4	10/20 Sand
2.5	5	Olive brown clay	24.4	0	3/8 Bentonite chips
5	17.5	Red-brown clay			
17.5	20	Light olive lean to silty clay			
20	25	Light olive to red-brown lean to silty clay			
25	32	Light red-brown silty clay			
32	42	Silty clay with sand and gravel			FS-MW4

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) 12-08-06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 12-26-06 under the business name of Pratt Well Environmental by (signature) *Steven E. Gill*

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blank, underline or circle the correct answers. Send 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.