

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:
 County: Chase Fraction NE 1/4 NE 1/4 SE 1/4 Section Number 16 Township Number T 19 S Range Number R 8 E/W
 Distance and direction from nearest town or city street address of well if located within city? at owner's address **Global Positioning Systems** (decimal degrees, min. of 4 digits)
 Latitude: 38.39712
 Longitude: 96.52133
 Elevation: 1556
 Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: TOM THOMASON
 RR#, St. Address, Box # : 1808 225th Rd
 City, State, ZIP Code : Strong City, KS 66869

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

-- NW --		-- NE --
-- SW --		-- SE --

 S
4 DEPTH OF COMPLETED WELL 195 ft.
 Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL..... 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
 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 GEOTHERMAL
 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: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued..... Clamped.....
 1 Steel 3 RMP (SR) 6 Asbestos-Cement Other (Specify below) Welded X
 2 PVC 4 ABS 7 Fiberglass HDPE Threaded.....
 Blank casing diameter 3/4 in. to 195 ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
 Casing height above land surface..... in., Weight.....lbs./ft. Wall thickness or guage No. SAR II
TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass NA 7 PVC 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 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..... ft. to..... ft., From..... ft. to..... ft.
GRAVEL PACK INTERVALS: From NA ft. to..... ft., From NA ft. to..... ft.
 From..... ft. to..... ft., From NA ft. to..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other.....
 Grout Intervals: From 5 ft. to 195 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 6 Other (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 HOUSE
 Direction from well? SOUTH How many feet? 15

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	CLAY	113	160	Shale, gray
10	12	LIMESTONE	160	163	LIMESTONE
12	48	Shale, gray	163	188	SHALE, Gray
48	50	Lime Stone, gray	188	195	LIMESTONE
50	71	Shale, gray			
71	74	Limestone			
74	92	Shale, gray			
92	95	Limestone			
95	110	Shale, gray			
110	113	LIMESTONE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This reconstructed well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7/7/09 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) 8/31/09 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.kdheks.gov/waterwell/index.html>.