

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>COFFEE</u>	Fraction <u>SW 1/4 SW 1/4 NR 1/4</u>	Section Number <u>6</u>	Township Number T <u>21</u> S	Range Number R <u>17</u> <u>W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1559 UNDERWOOD LN, WESTPHALIA</u>		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>38.25115</u> Longitude: <u>95.58133</u> Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: <u>RUBER GUARD</u> RR#, St. Address, Box # : <u>1559 UNDERWOOD LN</u> City, State, ZIP Code : <u>WESTPHALIA, KS 66093</u>				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td>-- NW --</td><td> </td><td>-- NE --</td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td>-- SW --</td><td> </td><td>-- SE --</td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table> W E S					-- NW --		-- NE --						-- SW --		-- SE --						4 DEPTH OF COMPLETED WELL <u>120</u> ft. Depth(s) Groundwater Encountered (1)..... <u>70</u> ft. (2)..... _____ ft. (3)..... _____ ft. WELL'S STATIC WATER LEVEL..... <u>66</u> ft. below land surface measured on mo/day/yr. <u>9/11/07</u> Pump test data: Well water was..... _____ ft. after..... _____ hours pumping..... _____ gpm Est. Yield. <u>20</u> 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 <u>1 Domestic</u> 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 <u>X</u>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <u>X</u> No
-- NW --		-- NE --																			
-- SW --		-- SE --																			

5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) <u>2 PVC</u> 4 ABS Blank casing diameter <u>6</u> in. to <u>120</u> ft., Diameter. _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface..... <u>24</u> in., Weight lbs./ft. Wall thickness or guage No. <u>SDR 26</u>	5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued.. <u>X</u> ... Clamped..... 6 Asbestos-Cement 9 Other (specify below) Welded..... 7 Fiberglass Threaded.....	2 Cement grout 3 <u>Bentonite</u> 4 Other
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <u>7 PVC</u> 9 ABS 11 Other (Specify)		
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..... <u>70</u> ft. to <u>90</u> ft., From _____ ft. to _____ ft. From..... _____ ft. to _____ ft., From _____ ft. to _____ ft.		
GRAVEL PACK INTERVALS: From..... <u>20</u> ft. to <u>120</u> 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 3 ft. to 28 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? East How many feet? 50

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	6	SOIL			
6	19	SHALE, GRAY, WEATHERED			
19	22	LFMESTONE			
22	55	SHALE, GRAY TO RED			
55	59	SANDSTONE			
59	62	SHALE, GRAY			
62	95	SANDSTONE			
95	120	SHALE, GRAY			

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) 9/11/07 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) 10/19/07 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>.