

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. [redacted]

1 LOCATION OF WATER WELL: County: Sedgewick Fraction: NW 1/4 NE 1/4 SE 1/4 Section Number: 31 Township Number: T 25 S Range Number: R 1 W

Distance and direction from nearest town or city street address of well if located within city? 1/4 mi S of Clay St
526 Dover Dr. 1/4 mi E of Dexter

2 WATER WELL OWNER: Dick Zimmerman
 RR#, St. Address, Box #: 526 Dover Dr.
 City, State, ZIP Code: Valley Center, KS

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

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

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

4 DEPTH OF COMPLETED WELL: _____ ft.

Depth(s) Groundwater Encountered (1) 14 ft. (2) _____ ft. (3) _____ ft.

WELL'S STATIC WATER LEVEL: 14 ft. below land surface measured on mo/day/yr. 8/19/05

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	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:

5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> _____ Clamped _____		
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded _____
2 PVC	4 ABS	7 Fiberglass		Threaded _____

Blank casing diameter 5 in. to 35 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.

Casing height above land surface 16 in., weight 160 lbs./ft. Wall thickness or guage No. 26

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	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 25 ft. to 35 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 24 ft. to 35 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From 4 ft. to 24 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 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 wll/gas well	

Direction from well? East How many feet? 23

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	topsoil			
2	13	clay			
13	21	fine sand			
21	35	med sand			

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) 8/19/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. Left This Water Well Recored was completed on (mo/day/year) 9/23/05 Under the business name of Chase Drilling by (signature) R Chase

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.