

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL:		Fraction <i>NE 1/4 SW 1/4 SW 1/4</i>	Section Number <i>25</i>	Township Number <i>T 26 S</i>	Range Number <i>R 4 E</i>												
County: <i>Butler</i>		Distance and direction from nearest town or city street address of well if located within city?															
2 WATER WELL OWNER: <i>Roy Huffman</i> RR#, St. Address, Box # <i>5800 SW 47th</i> City, State, ZIP Code <i>El Dorado, KS, 67042</i>		Global Positioning Systems (decimal degrees, min. of 4 digits)															
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <i>121</i> ft.															
<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">N</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">W</td> <td style="text-align: center;">NW</td> <td style="text-align: center;">NE</td> </tr> <tr> <td style="text-align: center;">S</td> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE</td> </tr> <tr> <td style="text-align: center;">E</td> <td></td> <td></td> </tr> </table>		N			W	NW	NE	S	SW	SE	E			Depth(s) Groundwater Encountered (1) <i>101</i> ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL <i>22</i> ft. below land surface measured on mo/day/yr..... Pump test data: Well water was ft. after hours pumping gpm Est. Yield <i>15</i> 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 <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> ; If yes, mo/day/yr Sample was submitted Water well disinfected? Yes <input checked="" type="checkbox"/> No 			
N																	
W	NW	NE															
S	SW	SE															
E																	
5 TYPE OF CASING USED:		5 Wrought Iron 1 Steel <input checked="" type="checkbox"/> PVC	8 Concrete tile 6 Asbestos-Cement 4 ABS	CASING JOINTS: Glued Clamped Welded Threaded													
Blank casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.																	
Casing height above land surface in., Weight lbs./ft. Wall thickness or guage No.																	
TYPE OF SCREEN OR PERFORATION MATERIAL:		1 Steel 2 Brass	3 Stainless Steel 4 Galvanized Steel	5 Fiberglass 6 Concrete tile	7 PVC 8 RM (SR)	9 ABS 10 Asbestos-Cement	11 Other (Specify) 12 None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE:		1 Continuous slot 2 Louvered shutter	3 Mill slot 4 Key punched	5 Gauzed wrapped 6 Wire wrapped	7 Torch cut 8 Saw cut	9 Drilled holes 10 Other (specify)	11 None (open hole)										
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.																	
From ft. to ft., From ft. to ft., From ft. to ft.																	
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.																	
From ft. to ft., From ft. to ft.																	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other																	
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.																	
What is the nearest source of possible contamination:		1 Septic tank 2 Sewer lines 3 Watertight sewer lines	4 Lateral lines 5 Cess pool 6 Seepage pit	7 Pit privy <input checked="" type="checkbox"/> Sewage lagoon 9 Feedyard	10 Livestock pens 11 Fuel storage 12 Fertilizer storage	13 Insecticide storage 14 Abandoned water well 15 Oil well/gas well	16 Other (specify) below)										
Direction from well? <i>northeast</i>		How many feet? <i>100</i> ft.															
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS											
<i>0</i>	<i>3</i>	<i>earth</i>															
<i>3</i>	<i>10</i>	<i>gumbo clay</i>															
<i>10</i>	<i>18</i>	<i>red clay</i>															
<i>18</i>	<i>28</i>	<i>yellow lime</i>															
<i>28</i>	<i>42</i>	<i>shale</i>															
<i>42</i>	<i>55</i>	<i>red bed</i>															
<i>55</i>	<i>121</i>	<i>shale + lime</i>															
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) <i>5/28/09</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>493</i> This Water Well Record was completed on (mo/day/year) <i>5/30/09</i> under the business name of <i>Reisner Well Drilling</i> by (signature) <i>Henry Reisner</i>																	
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html .																	