

# WATER WELL RECORD *BUTLER*

## Form WWC-5

Division of Water Resources; App. No.

<b>1 LOCATION OF WATER WELL:</b> County: Sedgewick		Fraction NE 1/4 SW 1/4 NE 1/4	Section Number 6	Township Number T 27 S	Range Number R 3 E										
Distance and direction from nearest town or city street address of well if located within city?			Global Positioning Systems (decimal degrees, min. of 4 digits)												
<b>2 WATER WELL OWNER:</b> RR#, St. Address, Box # : City, State, ZIP Code		Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____													
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		4 DEPTH OF COMPLETED WELL ..... 90 ft.													
<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td colspan="2" style="text-align: center;">N</td> </tr> <tr> <td style="text-align: center;">W</td> <td style="text-align: center;">X</td> </tr> <tr> <td colspan="2" style="text-align: center;">E</td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE</td> </tr> <tr> <td colspan="2" style="text-align: center;">S</td> </tr> </table>		N		W	X	E		SW	SE	S		Depth(s) Groundwater Encountered (1) ..... ft. (2) ..... ft. (3) ..... ft. WELL'S STATIC WATER LEVEL ..... 34 ft. below land surface measured on mo/day/yr 4-29-08 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			
N															
W	X														
E															
SW	SE														
S															
		Was a chemical/bacteriological sample submitted to Department? Yes ..... No ..... X; If yes, mo/day/ys Sample was submitted ..... Water well disinfected? Yes ..... No ..... X													
<b>5 TYPE OF CASING USED:</b>															
1 Steel		3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued ..... X Clamped ..... Welded ..... Threaded .....										
2 PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)											
Blank casing diameter ..... 5		in. to ..... 90	Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.												
Casing height above land surface ..... 10		in., Weight ..... 100 lbs./ft.	Wall thickness or guage No. ..... 26												
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>															
1 Steel		3 Stainless Steel	5 Fiberglass	7 PVC	9 ABS	11 Other (Specify) ..... 12 None used (open hole)									
2 Brass		4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement										
<b>SCREEN OR PERFORATION OPENINGS ARE:</b>															
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) .....										
<b>SCREEN-PERFORATED INTERVALS:</b> From ..... 50 ft. to ..... 90 ft., From ..... ft. to ..... ft.															
From ..... ft. to ..... ft., From ..... ft. to ..... ft.															
<b>GRAVEL PACK INTERVALS:</b> From ..... 24 ft. to ..... 90 ft., From ..... ft. to ..... ft.															
From ..... ft. to ..... ft., From ..... ft. to ..... ft.															
<b>6 GROUT MATERIAL:</b> 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										
2 Sewer lines		5 Cess pool	8 Sewage lagoon	11 Fuel storage	16 Other (specify) ..... 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? ..... South How many feet? ..... 95															
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS									
0	2	Top Soil													
2	19	Clay													
19	43	GROUT Shale													
43	90	Blue Shale													
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-29-08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 6911. This Water Well Record was completed on (mo/day/year) 5-24-08 under the business name of Chase Drilling by (signature) <i>Deeuf</i>															
<b>INSTRUCTIONS:</b> Use typewriter or ball point pen. <b>PLEASE PRESS FIRMLY</b> and <b>PRINT</b> 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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> .															

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