

**Form WWC-5**

Division of Water Resources: App. No.

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Section Number		Township Number	Range Number	
County: Crawford	SW ¼ SW ¼ SW ¼	5	T 29 S R 25 E				
Distance and direction from nearest town or city street address of well if located within city? 101 E. Washinton St, Arma, KS			<b>Global Positioning System</b> (decimal degrees, min. of 4 digits)				
<b>2 WATER WELL OWNER: Hale Petroleum</b> RR#, St. Address, Box # : PO Box 963 City, State, ZIP Code : Frontenac, KS 66763			Latitude: N 37.54439°				
			Longitude: W 94.70467°				
			Elevation: 1010.71 pin, 1010.44 toc				
			Datum: above mean sea level				
<b>3 LOCATE WELL'S SECTION BOX:</b>			<b>4 DEPTH OF COMPLETED WELL 11 ft.</b>				
			<b>MW2</b>				
			Depth(s) Groundwater Encountered l _____ ft. 2 _____ ft. 3 _____ ft.				
			WELL'S STATIC WATER LEVEL <u>7.05</u> ft. below land surface measured on mo/day/yr <u>12/5/07</u>				
			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 Feed lot 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/ys Sample was submitted _____ Water Well Disinfected? Yes _____ No <u>X</u>				
<b>5 TYPE OF CASING USED:</b>			<b>CASING JOINTS:</b> Glued _____ Clamped _____				
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____			Threaded <u>X</u>				
② PVC 4 ABS 7 Fiberglass							
Blank casing diameter <u>2</u> in. to <u>3.0</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			Casing height below land surface <u>0.27</u> ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____				
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>							
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)				
<b>SCREEN OR PERFORATION OPENINGS ARE:</b>							
1 Continuous slot ③ Mill slot 5 Guaze 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 <u>3</u> ft. to <u>11</u> ft. From _____ ft. to _____ ft.				
<b>GRAVEL PACK INTERVALS:</b>			From <u>2</u> ft. to <u>11</u> ft. From _____ ft. to _____ ft.				
<b>6 GROUT MATERIAL:</b>			<b>③ Bentonite ④ Other cement, 0-1 ft</b>				
Grout Intervals From <u>1</u> ft. to <u>2</u> 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 well/ gas well			Direction from well? <u>West</u> How many feet? <u>~10 ft.</u>				
<b>LITHOLOGIC LOG</b>		<b>PLUGGING INTERVALS</b>					
FROM	TO	FROM	TO				
0	1			Clay, dark gray-brown, moist, petroleum odor, poor recovery			
3	5			Clay, trace silt, dark olive brown, moist, petroleum odor, mottled dark gray			
8	10			Clayey weathered shale, yellow-brown, moist, no odor			
				Flushmount waiver from BOW			
<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) <u>12/4/07</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>757</u> . This Water Well Record was completed on (mo/day/year) <u>1/8/08</u> under the business name of <u>Larsen &amp; Associates, Inc.</u> by (signature) _____							
<b>INSTRUCTIONS:</b> Please fill in blanks 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.							