

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

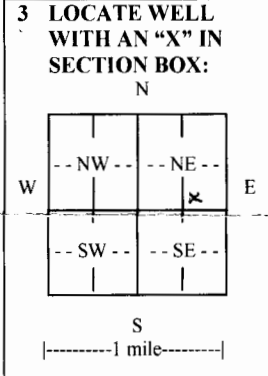
1 LOCATION OF WATER WELL: County: Brown	Fraction SW ¼ SE ¼ NE ¼ ¼	Section Number 20	Township No. T 2 S	Range Number R 17 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .
1011 North 4th St., Hiawatha, KS 66434

Global Positioning System (GPS) information:
Latitude: **.39,864167**..... (in decimal degrees)
Longitude: **95.531333**..... (in decimal degrees)
Elevation:

2 WATER WELL OWNER: **William E. & Terri A. McCauley**
RR#, Street Address, Box #: **112 - 220th Rd.**
City, State, ZIP Code : **Robinson, KS 66532**

Datum: WGS 84, NAD 83, NAD 27
Collection Method:
 GPS unit (Make/Model: **Garmin**).....
 Digital Map/Photo, Topographic Map, Land Survey
Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m



4 DEPTH OF COMPLETED WELL **71**..... ft.

Depth(s) Groundwater Encountered (1) **38**..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL **38**..... ft. below land surface measured on mo/day/yr. **12-29-10**.....

Pump test data: Well water was **44**..... ft. after **8**..... hours pumping **33**..... gpm
EST. YIELD **50**..... gpm. Well water was..... ft. after..... hours pumping..... gpm
Bore Hole Diameter **9.5**..... in. to **7.1**..... ft., and..... in. to..... ft.

WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below)
 Irrigation Industrial Domestic-lawn & garden Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No
If yes, mo/day/yr sample was submitted.....
Water well disinfected? Yes No

5 TYPE OF CASING USED: Steel PVC Other

CASING JOINTS: Glued Clamped Welded Threaded **Spline lock**

Casing diameter **5.0**..... in. to **5.1**..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
Casing height above land surface..... **18**..... in., Weight **2.96**..... lbs./ft., Wall thickness or gauge No. **265**.....

TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel PVC Other (Specify)

Brass Galvanized Steel None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify)

SCREEN-PERFORATED INTERVALS: From **51**..... ft. to **71**..... ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.

GRAVEL PACK INTERVALS: From **25**..... ft. to **71**..... ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From **0**..... ft. to **25**..... ft., From..... ft. to..... ft., From..... ft. to..... ft.

What is the nearest source of possible contamination:
 Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)
 Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well **None**

Direction from well..... Distance from well.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	5	No Sample			
5	12	Silty Clay - lt. Brn			
12	27	Clay - Brn			
27	30	sandy clay -Brn			
30	51	sandy clay - yellow brn			
51	60	sand - Brn F-C			
60	62	sandy clay - brn			
62	71	sandy clay - gray			

Original Returned to Sender
for Correction Date: 1-20-11

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) **12-29-10**..... and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. **308**..... This Water Well Record was completed on (mo/day/year) **1-13-11**.....
under the business name of **Rieschick Drilling Co. Inc.**..... by (signature) *[Signature]*

INSTRUCTIONS: Use typewriter or ball point pen. **PLEASE PRESS FIRMLY** and **PRINT** clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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 copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each **constructed** well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.