

**WATER WELL RECORD**

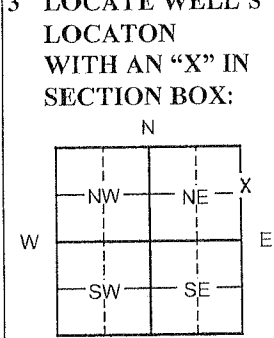
**Form WWC-5**

Division of Water Resources; App. No. \_\_\_\_\_

<b>1 LOCATION OF WATER WELL:</b> County: <u>Chautauqua</u>	Fraction: <u>SE 1/4 NE 1/4 NE 1/4</u>	Section Number: <u>10</u>	Township Number: <u>T 34 S</u>	Range Number: <u>R 8 E</u>
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Distance and direction from nearest town or city street address of well if located within city? 1520 Marsh Street, Cedar Vale KS

<b>2 WATER WELL OWNER:</b> <u>Short Stop, Inc.</u> RR#, St. Address, Box #: <u>PO Box 326</u> City, State, ZIP Code: <u>Cedar Vale KS 67024</u>	<b>Global Positioning System</b> (decimal degrees, min. of 4 digits) Latitude: <u>N 37.11052°</u> Longitude: <u>W 96.50809°</u> Elevation: <u>RIM:999.97; TOC:999.68</u> Datum: <u>WGS84</u> Data Collection Method: <u>legal survey</u>
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**4 DEPTH OF COMPLETED WELL** 8.75 ft.

RW1

Depth(s) Groundwater Encountered: \_\_\_\_\_ ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL: NA ft. below land surface measured on mo/day/yr NA

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 X; If yes, mo/day/yr \_\_\_\_\_  
 Sample was submitted \_\_\_\_\_ Water Well Disinfected? Yes \_\_\_\_\_ No X

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

Blank casing diameter: 4 in. to 3.75 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height below land surface: 0.29 ft., Weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. \_\_\_\_\_

**TYPE OF SCREEN OR PERFORATION MATERIAL:**

1 Steel	3 Stainless steel	5 Fiberglass	(7) PVC
2 Brass	4 Galvanized steel	6 Concrete tile	8 RM (SR)
9 ABS	11 Other (specify) _____	12 None used (open hole)	

**SCREEN OR PERFORATION OPENINGS ARE:**

1 Continuous slot	(3) Mill slot	5 Gauze wrapped	7 Torch cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut
9 Drilled holes	11 None (open hole)		

**SCREEN-PERFORATED INTERVALS:** From 3.75 ft. to 8.75 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
**GRAVEL PACK INTERVALS:** From 3 ft. to 8.75 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**6 GROUT MATERIAL:** 1 Neat cement 2 Cement grout (3) Bentonite (4) Other Concrete: 0-2ft

Grout Intervals: From 2 ft. to 3 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
2 Sewer lines	5 Cess pool	8 Sewage lagoon	(11) Fuel storage
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide Storage
			14 Abandoned water well
			15 Oil well/ gas well
			16 Other (specify below) _____

Direction from well? W \_\_\_\_\_ How many feet? ~50ft

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	Topsoil to gray brown stiff clay w/ gravel			
4	8.75	Gray brown stiff clay with friable shale fragments			

**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) 8/16/11 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 11/17/11 under the business name of Larsen & Associates, Inc. by (signature) \_\_\_\_\_

**INSTRUCTIONS:** 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>.

