

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Nemaha</u>	Fraction <u>SE 1/4 NE 1/4 NE 1/4</u>	Section Number <u>18</u>	Township Number T <u>4</u> S	Range Number R <u>13</u> <u>E/W</u>
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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)

Latitude: _____

Longitude: _____

Elevation: _____

Datum: _____

Data Collection Method: _____

2 WATER WELL OWNER: Mr. Lee Winkler
RR#, St. Address, Box # : 117B M4Rd
City, State, ZIP Code : CORNING, KS 66417

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

--NW--	--NE--
--SW--	--SE--

S

4 DEPTH OF COMPLETED WELL 210 ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL.. 80 ft. below land surface measured on mo/day/yr. 6-28-2010

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield. 12 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 Live Stock (Hog)

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

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
<u>PVC</u>	4 ABS	7 Fiberglass	

Blank casing diameter 6 in. to 190 ft., Diameter. _____ in. to _____ ft., Diameter _____ in. to _____ ft.

Casing height above land surface..... 22 in., Weight _____ lbs./ft. Wall thickness or guage No. SDR 21

CASING JOINTS: Glued... X Clamped..... Welded..... Threaded.....

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<u>PVC</u>	9 ABS	11 Other (Specify)
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<u>3 Mill slot</u>	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)	

SCREEN-PERFORATED INTERVALS: From 190 ft. to 210 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 160 ft. to 210 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Intervals: From 0 ft. to 25 ft., From 140 ft. to 160 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	<u>16 Other (Specify below)</u>
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	<u>NFWS (LOW STRIKER)</u>

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	CLAY BROWN			
10	16	SAND POORLY SORTED, fine to coarse			
16	199	CLAY TRUCK GRAVEL			
199	210	GRAVEL w/ CLAY LENSAS			

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) 6-28-2010 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 760 This Water Well Record was completed on (mo/day/year) 6-11-2010 under the business name of ASSOCIATED DRILLERS by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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 constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.