

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Washington		Fraction SW 1/4 NW 1/4 SW 1/4		Section Number 32		Township Number T 5 S		Range Number R 1 EW													
Distance and direction from nearest town or city street address of well if located within city? 3 miles west of Vining and 1/2 mile north					Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 39° 34' 18.7" Longitude: 097° 20' 53.2" Elevation: _____ Datum: _____ Data Collection Method: Hand held																
2 WATER WELL OWNER: Harold Elsasser RR#, St. Address, Box # : 26 Arrowhead Road City, State, ZIP Code : Clyde, KS 66938																					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td></tr><tr><td>-- NW --</td><td>-- NE --</td><td> </td></tr><tr><td>W</td><td>X</td><td>E</td></tr><tr><td>-- SW --</td><td>-- SE --</td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table> S					-- NW --	-- NE --		W	X	E	-- SW --	-- SE --					4 DEPTH OF COMPLETED WELL75..... ft. Depth(s) Groundwater Encountered (1)..... 28 ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 28 ft. below land surface measured on mo/day/yr 06/30/2003 Pump test data: Well water was..... 49 ft. after..... 1 hours pumping..... 800 gpm Est. Yield..... 500 gpm: Well water was..... 42 ft. after..... 1 hours pumping..... 500 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) 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				
-- NW --	-- NE --																				
W	X	E																			
-- SW --	-- SE --																				
5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 8 Concrete tile CASING JOINTS: Glued..... Clamped..... 2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded..... Blank casing diameter 16 in. to 35 ft., Diameter..... in. to ft., Diameter..... in. to ft. Casing height above land surface..... 12 in., Weight..... 20.183 lbs./ft. Wall thickness or gauge No.625" TYPE OF SCREEN OR PERFORATION MATERIAL: 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) SCREEN OR PERFORATION OPENINGS ARE: 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) SCREEN-PERFORATED INTERVALS: From..... 35 ft. to 75 ft., From..... ft. to ft. GRAVEL PACK INTERVALS: From..... 13 ft. to 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 Grout Intervals: From..... 3 ft. to 13 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 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? SW How many feet? 500																					
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS																					
0' 5' Topsoil																					
5' 15' Clay with fine to medium sand and fine gravel																					
15' 20' Fine to medium sand																					
20' 45' Medium gravel with cobbles																					
45' 50' Coarse sand with clay																					
50' 60' Coarse sand and fine gravel with cobbles																					
60' 69' Coarse sand and fine gravel																					
69' 80' Shale																					
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) 06/30/2003 ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 755 This Water Well Record was completed on (mo/day/year) 06/02/2008 under the business name of Sargent Drilling by (signature) <i>[Signature]</i>																					
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 http://www.kdhe.state.ks.us/geo/waterwells .																					