

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: <u>CLAY</u>	Fraction <u>SE 1/4 NE 1/4 NE 1/4</u>	Section Number <u>6</u>	Township Number T <u>9</u> S	Range Number R <u>2</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city?		<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits)		
<b>2 WATER WELL OWNER:</b> <u>DAREK PFLENNMEIER</u> RR#, St. Address, Box # : <u>1544 BROWN RD</u> City, State, ZIP Code : <u>CLARENCE, KS 67432</u>		Latitude: <u>39.30370</u>		
		Longitude: <u>97.24059</u>		
		Elevation: <u> </u>		
		Datum: <u> </u>		
		Data Collection Method: <u> </u>		

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N <table border="1" style="width: 100%; height: 100%; text-align: center; border-collapse: collapse;"> <tr><td> </td><td> </td><td> </td></tr> <tr><td>--NW--</td><td>--NE--</td><td><b>X</b></td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td>--SW--</td><td>--SE--</td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> W  S				--NW--	--NE--	<b>X</b>				--SW--	--SE--					<b>4 DEPTH OF COMPLETED WELL</b> ..... <u>188</u> ..... ft.  Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr..... 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 Feedlot    6 Oil field water supply    9 Dewatering <u>12 Other (Specify below)</u> <u>CLAY LINO</u> <u>GEOTHERMAL</u> 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/yr Sample was submitted..... Water well disinfected? Yes ..... No <u>X</u> .....
--NW--	--NE--	<b>X</b>														
--SW--	--SE--															

<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. <u>X</u>
2 PVC	4 ABS	7 Fiberglass	Threaded.....
Blank casing diameter ..... <u>3/4</u> ..... in. to <u>1.88</u> ..... ft., Diameter. .... in. to ..... ft., Diameter ..... in. to ..... ft.			
Casing height <del>above</del> land surface..... <u>60</u> ..... in., Weight ..... lbs./ft. Wall thickness or gauge No. <u>SDR11</u>			
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>			
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) .....
		10 Asbestos-Cement	12 None used (open hole)
<b>SCREEN OR PERFORATION OPENINGS ARE:</b>			
1 Continuous slot	3 Mill slot	5 Gauzed wrapped	7 Torch cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw cut
		9 Drilled holes	11 None (open hole)
<b>SCREEN-PERFORATED INTERVALS:</b> From..... ft. to ..... ft., From..... ft. to ..... ft.			
<b>GRAVEL PACK INTERVALS:</b> From..... ft. to ..... ft., From..... ft. to ..... ft.			

<b>6 GROUT MATERIAL:</b>	1 Neat cement	2 Cement grout	3 <u>Bentonite</u>	4 Other .....
Grout Intervals: From <u>5</u> ..... ft. to <u>188</u> ..... 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
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>SOUTH</u>				How many feet? <u>20</u>
<u>CLAY</u>				

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	30	CLAY			
30	35	SANDY CLAY			
35	40	SAND			
40	46	FRACTURED SHALE			
46	188	SHALE w/ SOME GYPSSUM			

**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) 5/24/08 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) 6/15/08 under the business name of ASSOCIATED DRILLERS INC. 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>.