| WATER WELL RECORD | | | Form WWC- | Form WWC-5 | | Division of Water Resources; App. No. | | |
|---|---|----------------|----------------------|------------|--|---------------------------------------|---------|--|
| 1 LOCATION OF WATER WELL: | | | | | Section Number | Township Number | /- | |
| County: OTTAWA Distance and direction from nearest town or city street address of well if | | | | | 33 T 10 S R 2W E/W | | | |
| located within city? 1243 N.KXXXXXXXX | | | | | Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: | | | |
| 203rd. RD. WELLS, KS. | | | | | Latitude: Longitude: | | | |
| 2 WATER WELL OWNER: JUSTIN ROBERTSON | | | | | Elevation: | | | |
| | | ss, Box # : 18 | 342 K-18 HWY | | Datum: | | | |
| City, State, ZIP Code : BENNINGTON, KS. 67422 | | | | | Data Collection Method: | | | |
| 3 LOCA | ATE WE | LL'S 4 DEPTH 0 | OF COMPLETED WELL99. | | ft. | | | |
| | LOCATION | | | | | | | |
| | | | | | | | ft. | |
| SECT | SECTION BOX: WELL'S STATIC WATER LEVEL56 ft. below land surface measured on mo/day/yr Pump test data: Well water was6.5ft. after2 hours pumping1.0 | | | | | | | |
| | Est. Yieldgpm: Well water was | | | | | | | |
| | WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Demostic 3 Feedlet 6 Oil field water supply 9 Devetoring 12 Other (Specific | | | | | | | |
| w NW | | | | | | | | |
| 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well | | | | | | nitoring well | | |
| XW | SE - | , , | | | D | 3.7 V | TC /1 / | |
| | Was a chemical/bacteriological sample submitted to Department? Yes NoA; If yes, mo/day/yrs | | | | | | | |
| Sample was submitted | | | | | | | | |
| | | | | | | | | |
| 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued. X Clamped 9 Other (specify below) Welded | | | | | | | | |
| | | | | | | | | |
| <u>2 PVC</u> 4 ABS 7 Fiberglass Threaded | | | | | | | | |
| Casing height above land surface20in., weight .1.6.0lbs./ft. Wall thickness or guage NoSDR26 | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | |
| 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) | | | | | | | | |
| 2 Brass 4 Galvanized Steal 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 025 5. Guazed 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 | | | | | | | | |
| From | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | |
| rrom π., rrom π. to tt. | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other | | | | | | | | |
| Grout Intervals: From | | | | | | | | |
| 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 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) | | | | | | | | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil wll/gas well | | | | | | | | |
| Direction from well? EAST How many feet? 70 | | | | | | | | |
| FROM | TO | LIT | HOLOGIC LOG | FROM | | PLUGGING INTI | | |
| 0 | 2 | TOP SOIL | | | | | | |
| 2 | 1.2 | SANDY LOOM | | | | | | |
| 12 | 31 | CLAY LIGHT | | | | | | |
| 31 | 43 | SANDSTONE T | :AN | | | | | |
| 65 | 65 85 | CLAY GRAY | ITH CLAY LAYERS | | | | | |
| 85 | 99 | SANDSTONE W | | - | | | | |
| 0.5 | 23 | OWNDRIONE I | . ΩΙΥ | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 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) .0.51.80.6 and this record is true to the best of my knowledge and belief. | | | | | | | | |
| Kansas Water Well Contractor's License No388 This Water Well Record was completed on (mortaly/year) 0.5-1.8-0.6 | | | | | | | | |
| Under the business name of PESTINGER PUMP SERVICE by (signature) and Station | | | | | | | | |

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.