

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Wallace</u>	Fraction <u>SE 1/4 SE 1/4 SE 1/4</u>	Section Number <u>16</u>	Township Number T <u>13</u> S	Range Number R <u>42</u> E <u>(W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>From Weskan 3.5 mi N 1 W</u>		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>N 38.91600</u> Longitude: <u>W 101.98168</u> Elevation: _____ Datum: <u>NAD 83</u> Data Collection Method: <u>Handheld GPS</u>		

2 WATER WELL OWNER: Rene Gunzelman
RR#, St. Address, Box # : 1415 Rd. 3
City, State, ZIP Code : Weskan, KS 67762

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> </td><td>--NE--</td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td>--SW--</td><td> </td><td>--SE--</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> S				--NW--		--NE--				--SW--		--SE--				4 DEPTH OF COMPLETED WELL <u>130</u> ft. Depth(s) Groundwater Encountered (1)..... <u>63</u> ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... <u>63</u> ft. below land surface measured on mo/day/yr. <u>3-24-12</u> Pump test data: Well water was..... <u>7.1</u> ft. after..... <u>1</u> hours pumping..... <u>25</u> gpm Est. Yield... <u>50</u> ...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 <input checked="" type="checkbox"/> 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 Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No
--NW--		--NE--														
--SW--		--SE--														

5 TYPE OF CASING USED:
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below)
2 PVC 4 ABS 7 Fiberglass
Blank casing diameter 5/8 in. to 110 ft., Diameter. in. to ft., Diameter in. to ft.
Casing height above land surface..... 24 in., Weight..... 265 lbs./ft. Wall thickness or gauge No. 281
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..... 110 ft. to 130 ft., From ft. to ft.
From..... ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From..... 27 ft. to 130 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 0 ft. to 27 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? North How many feet? 3000

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	30	clay			
30	45	clay with sand strips			
45	90	sand & gravel			
90	<u>100</u>	sand & gravel with strips of clay			
120	125	sandy clay			
125	130	s. late			

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) 3-24-12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 213 This Water Well Record was completed on (mo/day/year) 4-14-12 under the business name of Komp's Well Service by (signature) George Komp

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.kdhe.state.ks.us/geo/waterwells>.