

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>SALINE</u>		Fraction <u>NE 1/4 NW 1/4 SW 1/4</u>		Section Number <u>30</u>	Township Number <u>T 14 S</u>	Range Number <u>R 26 E/W</u>																																																																																				
Distance and direction from nearest town or city street address of well if located within city? <u>2134 REDHAWK LANE</u>				Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																																																																																						
2 WATER WELL OWNER: <u>PEGGY ANDERSON</u> RR#, St. Address, Box # : <u>2134 REDHAWK LANE</u> City, State, ZIP Code : <u>SALINA, KS 67401</u>																																																																																										
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">--NW--</td> <td style="padding: 5px;">--NE--</td> </tr> <tr> <td style="padding: 5px;">W</td> <td style="padding: 5px;">E</td> </tr> <tr> <td style="text-align: center; padding: 5px;"> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">--SW--</td> <td style="padding: 5px;">--SE--</td> </tr> </table> </td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">S</td> </tr> </table>		--NW--	--NE--	W	E	<table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="padding: 5px;">--SW--</td> <td style="padding: 5px;">--SE--</td> </tr> </table>	--SW--	--SE--			S	4 DEPTH OF COMPLETED WELL <u>54</u> ft. Depth(s) Groundwater Encountered (1)..... <u>16</u> ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... <u>16</u> ft. below land surface measured on mo/day/yr <u>06-17-10</u> Pump test data: Well water was..... <u>16</u> ft. after..... <u>1</u> hours pumping..... <u>20</u> 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 12 Other (Specify below) 2 Irrigation 4 Industrial <u>7 Domestic (lawn & garden)</u> 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 <u>X</u> No																																																																														
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6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other Grout Intervals: From <u>0</u> ft. to <u>22</u> ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: <table style="width: 100%;"> <tr> <td>1 Septic tank</td> <td>4 Lateral lines</td> <td>7 Pit privy</td> <td>10 Livestock pens</td> <td>13 Insecticide storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>5 Cess pool</td> <td>8 Sewage lagoon</td> <td>11 Fuel storage</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td><u>3 Watertight sewer lines</u></td> <td>6 Seepage pit</td> <td>9 Feedyard</td> <td>12 Fertilizer storage</td> <td>15 Oil well/gas well</td> <td></td> </tr> </table> Direction from well? <u>EAST</u> How many feet? <u>40</u>							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		<u>3 Watertight sewer lines</u>	6 Seepage pit	9 Feedyard	12 Fertilizer storage	15 Oil well/gas well																																																																			
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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) <u>06-17-10</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>388</u> This Water Well Record was completed on (mo/day/year) <u>06-17-10</u> under the business name of <u>PESTINGER PUMP SER.</u> by (signature) <u>Paul Pestinger</u>																																																																																										
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 <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html .																																																																																										