

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: <u>Wallace</u>	Fraction <u>SE 1/4 SE 1/4 SE 1/4</u>	Section Number <u>29</u>	Township Number <u>T 14 S</u>	Range Number <u>R 40 E/W</u>
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Distance and direction from nearest town or city street address of well if located within city?  
65 2W of Sharon Springs

**Global Positioning Systems** (decimal degrees, min. of 4 digits)  
 Latitude: N 38.80000  
 Longitude: W 101.78007  
 Elevation: \_\_\_\_\_  
 Datum: NAD 83  
 Data Collection Method: Handheld unit

**2 WATER WELL OWNER:** Wayne Coker  
 RR#, St. Address, Box # : 1910 Dusty Road  
 City, State, ZIP Code : Sharon Springs KS 67758

**3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

N

NW	NE	E
SW	SE	S

X

**4 DEPTH OF COMPLETED WELL** ..... 238 ..... ft.

Depth(s) Groundwater Encountered (1) 176' ..... ft. (2) ..... ft. (3) ..... ft.  
 WELL'S STATIC WATER LEVEL 176' ..... ft. below land surface measured on mo/day/yr. 8-29-08  
 Pump test data: Well water was 179 ..... ft. after 1 ..... hours pumping 20 ..... gpm  
 Est. Yield 50 ..... 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 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 X ..... No .....

**5 TYPE OF CASING USED:**

1 Steel	3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> ..... Clamped..... Welded..... Threaded.....
<u>2 PVC</u>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	

Blank casing diameter 5 1/2 ..... in. to 238 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface 24 ..... in., Weight 268 ..... lbs./ft. Wall thickness or gauge No. 265 .....

**TYPE OF SCREEN OR PERFORATION MATERIAL:**

1 Steel	3 Stainless Steel	5 Fiberglass	<u>7 PVC</u>	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	<u>3 Mill slot</u>	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 218 ..... ft. to 238 ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**GRAVEL PACK INTERVALS:** From 25 ..... ft. to 238 ..... 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 5 ..... ft. to 25 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination:

<u>1 Septic tank</u>	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? S. with ..... How many feet? 4.00 .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	15	clay			
15	25	sandy clay			
25	105	sandy clay clay with strips of sand			
105	110	consolidated sand			
110	130	sandy clay			
130	150	sand			
150	165	sand and cemented sand			
165	227	sand/gravel			
227	230	clay			
230	233	sand	233 shale	238 hole	

**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) 8-29-08 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) 8-29-08  
 under the business name of Kemp's Well Service by (signature) George Kemp

**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>.