

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Wallace</u>	Fraction <u>NW 1/4 NW 1/4 S10 1/2</u>	Section Number <u>25</u>	Township Number <u>T 14 S</u>	Range Number <u>R 40 E00</u>
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Distance and direction from nearest town or city street address of well if located within city? _____
 Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: Harley Schmidt
 RR#, St. Address, Box # : 2055 Gooseberry Rd
 City, State, ZIP Code : Sharon Springs KS 67758

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

N			
W	--NW--	--NE--	E
	--SW--	--SE--	
S			

4 DEPTH OF COMPLETED WELL 194 ft.

Depth(s) Groundwater Encountered (1).....110..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL.....110..... ft. below land surface measured on 11-26-12

Pump test data: Well water was.....110.....ft. after.....1..... hours pumping.....15..... gpm

Est. Yield.....15.....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 Stock

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)	6 Asbestos-Cement	9 Other (specify below)
<u>2 PVC</u>	4 ABS	7 Fiberglass	

Blank casing diameter 5 in. to 154 ft., Diameter..... in. to ft., Diameter..... in. to ft.

Casing height above land surface..... 12 in., Weight 2284 lbs./ft. Wall thickness or gauge No. SPR 21

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<u>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	3 Mill slot	5 Ganned wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	<u>8 Saw Cut</u>	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From 154 ft. to 194 ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 20 ft. to 194 ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout intervals: From 0 ft. to 20 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination: none in sight

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? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Stone/Clay mix			
10	120	Sand			
120	180	Small Gravel			
180	194	Shale			

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 DEC 20 2012
 BUREAU OF WATER

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) 11-26-12 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 727 This Water Well Record was completed on (mo/day/year) 12-11-12 under the business name of B's Pump Well by (signature) Harley Schmidt

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>.