

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Saline</u>	Fraction <u>NW 1/4 NW 1/4 NW 1/4</u>	Section Number <u>10</u>	Township Number T <u>14</u> S	Range Number R <u>5</u> E <u>W</u>
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: <u>38.85510</u> Longitude: <u>97.87247</u> Elevation: <u>1396</u> Datum: <u>WGS 84</u> Data Collection Method:		

2 WATER WELL OWNER: RAY BRADY
RR#, St. Address, Box # : 740 N. BROOKVILLE RD
City, State, ZIP Code : BROOKVILLE, KS 67425

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

N		E	
<input checked="" type="checkbox"/>			
--NW--	--NE--		
--SW--	--SE--		
S		W	

4 DEPTH OF COMPLETED WELL 200 ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr.....
Pump test data: Well water was..... ft. after..... hours pumping..... 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 7 Domestic (lawn & garden) 10 Monitoring well GEOTHERMAL

Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes No X

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	8 Concrete tile	CASING JOINTS: Glued..... Clamped.....
2 PVC	4 ABS	7 Fiberglass	9 Other (Specify below)	Welded <u>X</u>
			<u>HOPPE</u>	Threaded.....

Blank casing diameter 3/4 in. to 200 ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
Casing height 60 land surface..... in., Weight..... lbs./ft. Wall thickness or gauge No. SAK1

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 Sawed 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..... ft. to..... ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.

GRAVEL PACK INTERVALS: From..... ft. to..... 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 200 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	<u>HOUSE</u>

Direction from well? WEST How many feet? 30

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	CLAY			
10	22	Shale, a variety of colors			1-200
22	23	Lime stone			1-185
23	92	Shale			1-170
92	94	CONCRETE			1-155
94	135	Shale			
135	136	Lime stone			
136	169	Shale			
169	170	Lime stone			
170	200	Shale			

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) 10-6-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 790 This Water Well Record was completed on (mo/day/year) 1-28-10 under the business name of Associated Drilling Co by (signature) [Signature]

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>.