

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: <u>Russell</u> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> . <u>7 South, 2 West of Dorrance</u>	Fraction $\frac{1}{4}$ NE $\frac{1}{4}$ SE $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number <u>14</u>	Township No. <u>T 15 S</u>	Range Number <u>R 12</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Global Positioning System (GPS) information:
 Latitude: (in decimal degrees)
 Longitude: (in decimal degrees)
 Elevation:
 Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27
 Collection Method:
☐ GPS unit (Make/Model:)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
 Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: <u>Jack Schlessiger</u> RR#, Street Address, Box #: <u>1272 NE 120 Road</u> City, State, ZIP Code: <u>Claffin, KS 67525</u>	3 LOCATE WELL WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>
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4 DEPTH OF COMPLETED WELL <u>220</u> ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL <u>151</u> ft. below land surface measured on mo/day/yr. <u>8-16-13</u> Pump test data: Well water was..... ft. after..... hours pumping..... gpm EST. YIELD. <u>N/A</u> gpm. Well water was..... ft. after..... hours pumping..... gpm Bore Hole Diameter <u>10</u> in. to <u>220</u> ft., and in. to ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input checked="" type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well <u>Stock</u> Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	5 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter <u>5</u> in. to <u>220</u> ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface <u>18</u> in., Weight <u>SDR-26</u> lbs./ft., Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input checked="" type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From <u>220</u> ft. to <u>160</u> ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From <u>220</u> ft. to <u>20</u> ft., From ft. to ft. From ft. to ft., From ft. to ft.
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6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From ft. to ft., From <u>20</u> ft. to <u>0</u> ft., From ft. to ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input checked="" type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well <u>Pond</u> Direction from well <u>Northeast</u> Distance from well <u>75 ft.</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>1</td> <td>Top soil</td> <td>185</td> <td>191</td> <td>Gray shale with streaks of hard sandstone</td> </tr> <tr> <td>1</td> <td>25</td> <td>Clay & limestone</td> <td></td> <td></td> <td></td> </tr> <tr> <td>25</td> <td>96</td> <td>Black shale & limestone</td> <td>191</td> <td>205</td> <td>Fire clay</td> </tr> <tr> <td>96</td> <td>115</td> <td>Gray shale</td> <td>205</td> <td>215</td> <td>Sandstone</td> </tr> <tr> <td>115</td> <td>161</td> <td>Light gray shale w/ tan rock & iron pyrite</td> <td>215</td> <td>220</td> <td>Hard tan rock & shale</td> </tr> <tr> <td>161</td> <td>165</td> <td>Shale & sandstone</td> <td></td> <td></td> <td></td> </tr> <tr> <td>165</td> <td>171</td> <td>Fire clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>171</td> <td>185</td> <td>Sandstone w/ shale streaks</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	1	Top soil	185	191	Gray shale with streaks of hard sandstone	1	25	Clay & limestone				25	96	Black shale & limestone	191	205	Fire clay	96	115	Gray shale	205	215	Sandstone	115	161	Light gray shale w/ tan rock & iron pyrite	215	220	Hard tan rock & shale	161	165	Shale & sandstone				165	171	Fire clay				171	185	Sandstone w/ shale streaks			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) 8-16-13..... and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 134..... This Water Well Record was completed on (mo/day/year) 9-12-13.....
 under the business name of Rosencrantz Bemis Ent Inc..... by (signature) [Signature].....

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.