

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL:

County: Ellsworth

Fraction

NW 1/4 SW 1/4 SW 1/4

Section Number

17

Township Number

T 15 S

Range Number

R 6 E WDistance and direction from nearest town or city street address of well if located within city? 1/2 mile East of Carmeria, KS.

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: _____

Longitude: _____

Elevation: _____

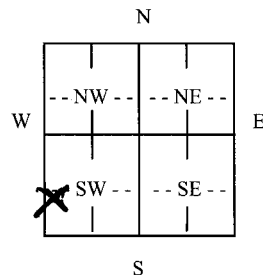
Datum: _____

Data Collection Method: _____

2 WATER WELL OWNER:

RR#, St. Address, Box # : Manuel & Sonia Garcia
City, State, ZIP Code : 1477 Fairchild's Rd
Salina, KS 67401

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

4 DEPTH OF COMPLETED WELL 120 ft.Depth(s) Groundwater Encountered (1)..... 3.7 ft. (2)..... _____ ft. (3)..... _____ ft.
WELL'S STATIC WATER LEVEL..... 35 ft. below land surface measured on mo/day/yr. 6-23-2010

Pump test data: Well water was..... _____ ft. after..... _____ hours pumping..... _____ gpm

Est. Yield. 2 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/yrSample 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. X Clamped.....

2 PVC

4 ABS

6 Asbestos-Cement

9 Other (specify below)

Welded.....

Blank casing diameter 6 in. to 120 ft., Diameter. _____ in. to _____ ft., Diameter _____ in. to _____ ft.

Threaded.....

Casing height above land surface..... 24 in., Weight _____ lbs./ft. Wall thickness or gauge No. SDR26

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel

3 Stainless Steel

5 Fiberglass

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

2 Mill slot

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..... 35 ft. to 55 ft., From _____ ft. to _____ ft.

From..... _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From..... 25 ft. to 120 ft., From _____ ft. to _____ ft.

From..... _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL:

1 Neat cement

2 Cement grout

Bentonite

4 Other _____

Grout Intervals: From 3 ft. to 25 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

2 Sewer lines

5 Cess pool

8 Sewage lagoon

11 Fuel storage

14 Abandoned water well

below)

3 Watertight sewer lines

6 Seepage pit

9 Feedyard

12 Fertilizer storage

15 Oil well/gas well

Direction from well? Unknown How many feet? 25 feet

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>4</u>	<u>Clay, brown</u>			
<u>4</u>	<u>37</u>	<u>Shale, mottled white/red</u>			
<u>37</u>	<u>39</u>	<u>Sandstone, tan, H/O</u>			
<u>39</u>	<u>120</u>	<u>Shale, mottled red.</u>			
<u>120</u>		<u>120</u>			

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) 6-23-2010 and this record is true to the best of my knowledge and belief.Kansas Water Well Contractor's License No. 760 This Water Well Record was completed on (mo/day/year) 7-1-2010 under the business name of Associated Drilling Inc 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>.