

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Barton		Fraction ¼ SW ¼ NE ¼ SE ¼	Section Number 12	Township No. T 18 S	Range Number R 14 ☐ E ☒ W				
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ 1 South, 2 1/4 West of Hoisington			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: Harland Rupp RR#, Street Address, Box #: 232 NW 100 Road City, State, ZIP Code : Hoisington, KS 67544									
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N W <table border="1" style="border-collapse: collapse; text-align: center;"> <tr> <td style="padding: 5px;">-- NW --</td> <td style="padding: 5px;">-- NE --</td> </tr> <tr> <td style="padding: 5px;">-- SW --</td> <td style="padding: 5px;">-- SE --</td> </tr> </table> E S -----1 mile-----		-- NW --	-- NE --	-- SW --	-- SE --	4 DEPTH OF COMPLETED WELL 70 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 36 ft. below land surface measured on mo/day/yr. 12-17-13..... Pump test data: Well water was.....ft. after..... hours pumping..... gpm EST. YIELD. N/A.....gpm. Well water was.....ft. after..... hours pumping..... gpm Bore Hole Diameter 10 in. to 70 ft., and in. to ft. WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☒ Other (Specify below) ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well ☐ Stock Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No If yes, mo/day/yr sample was submitted..... Water well disinfected? ☒ Yes ☐ No			
-- NW --	-- NE --								
-- SW --	-- SE --								
5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded Casing diameter 5 in. to 70 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 18 in., Weight SDR26 lbs./ft., Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☒ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☒ Saw cut ☐ Other (specify) SCREEN-PERFORATED INTERVALS: From 60 ft. to 40 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 70 ft. to 20 ft., From ft. to ft. From ft. to ft., From ft. to ft.									
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other Grout Intervals: From ft. to ft., From 20 ft. to 0 ft., From ft. to ft. What is the nearest source of possible contamination: ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☒ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well ☐ Pumping Unit Direction from well Northwest Distance from well 300ft									
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS				
0	4	Top soil							
4	21	Gray shale							
21	26	Ironated sandstone							
26	30	Gray shale							
30	35	Sandstone/ coal/ bits of shale							
35	41	Gray shale							
41	54	Sadnstone/ shale streaks							
54	70	Gray shale							
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) 12-19-13..... 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) 12-23-13..... under the business name of Rosencrantz-Bemis by (signature) <i>Gora Alabi</i>									
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. I include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html .									