

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Ness</u>	Fraction <u>SE ¼ NW ¼ NE ¼</u>	Section Number <u>31</u>	Township Number T <u>18</u> S	Range Number R <u>23</u> W
---	-----------------------------------	-----------------------------	----------------------------------	-------------------------------

Distance and direction from nearest town or city street address of well if located within city? 520 S. Pennsylvania St., Ness City, KS 67560

2 WATER WELL OWNER: Harold Gable
 RR#, St. Address, Box # : 705 S. Topeka Ave
 City, State, ZIP Code : Ness City, KS 67560

Global Positioning System (decimal degrees, min. of 4 digits)
 Latitude: N 38.44854°
 Longitude: W 99.90462°
 Elevation: RIM: 2241.67; TOC: 2241.37
 Datum: WGS84
 Data Collection Method: legal survey

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

N			
	NW	X	NE
W			
	SW		SE
S			

4 DEPTH OF COMPLETED WELL 40.15 ft.
 MW3R

Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL 33.90 ft. below land surface measured on mo/day/yr 4/13/15
 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 Feed lot 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/yr
 Sample was submitted _____ Water Well Disinfected? Yes _____ No X

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
2 PVC 4 ABS 7 Fiberglass Threaded X

Blank casing diameter 2 in. to 25.15 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height below land surface 0.30 ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____

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 Gauze 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 25.15 ft. to 40.15 ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 23 ft. to 40.95 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 Concrete: 0-1ft

Grout Intervals From 1 ft. to 23 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

Direction from well? NW How many feet? ~55 ft

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5	Concrete			
0.5	5	Brown silty clay			
5	15	Dark brown silty clay			
15	24	Light brown silty clay			
24	25	Medium grained sand			
25	30	Medium to coarse grained sand			
30	40.95	Gray, medium to coarse grained sand			

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) 4/13/15 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 5/4/15
 under the business name of Larsen & Associates, Inc. by (signature) _____

INSTRUCTIONS: Please fill in blanks 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>.