

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Barton	Fraction ¼ NW ¼ NW ¼ NW ¼	Section Number 32	Township No. T 19 S	Range Number R 13 ☐ E ☒ W
--	------------------------------	----------------------	------------------------	---

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒.

911 Grant Street

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 SurveyEst. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: Comfort Inn
RR#, Street Address, Box #: 911 Grant Street
City, State, ZIP Code : Great Bend, Ks. 67530

3 LOCATE WELL WITH AN "X" IN SECTION BOX:

		N					
		W	E				
W	---NW---					---NE---	E
	---SW---					---SE---	
		S					
-----1 mile-----							

4 DEPTH OF COMPLETED WELL 57 ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL 18 ft. below land surface measured on mo/day/yr. 7-5-11.....

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 57..... 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 wellWas a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No

If yes, mo/day/yr sample was submitted.....

Water well disinfected? ☒ Yes ☐ No**5 TYPE OF CASING USED:** ☐ Steel ☒ PVC ☐ OtherCASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded

Casing diameter 5..... in. to 57..... ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface 18..... in., Weight SDR 26..... 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 57..... ft. to 42..... ft., From ft. to ft.

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

GRAVEL PACK INTERVALS: From 57..... ft. to 39..... ft., From ft. to ft.

From 32..... ft. to 20..... ft., From ft. to ft.

6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other

Grout Intervals: From ft. to ft., From 39..... ft. to 32..... ft., From 20..... ft. to 0..... 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 Hotel

Direction from well North..... Distance from well 10.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	Top soil			
3	19	Sand & gravel- clean, coarse, & loose			
19	23	Tan clay			
23	32	Sand & gravel- clean, coarse, & loose			
32	43	Tan clay			
43	57	Sand & gravel- clean, med, & loose			

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) 7-5-11..... 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) 7-8-11..... under the business name of Rosencrantz Bemis..... by (signature) *Sara Akers*

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 785-296-5522. 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>.