

# WATER WELL RECORD Form WWC-5

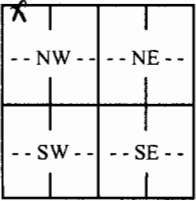
☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water  
Resources App. No.

Well ID

<b>1 LOCATION OF WATER WELL:</b> County: Barton	Fraction ¼ NW ¼ NW ¼ NW ¼	Section Number 15	Township Number T 20 S	Range Number R 13 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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<b>2 WELL OWNER:</b> Last Name: Schneider First: Todd Business: Address: 109 SE 30 Road Address: City: Great Bend State: KS ZIP: 67530	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input type="checkbox"/> 2S of Great Bend, KS
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<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N  S -----1 mile-----	<b>4 DEPTH OF COMPLETED WELL:</b> ..... 62 ..... ft. Depth(s) Groundwater Encountered: 1) ..... 19 ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ..... 19 ..... ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 01/08/19 <input type="checkbox"/> above land surface, measured on (mo-day-yr) ..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Well water was ..... ft. after ..... hours pumping ..... gpm Estimated Yield: ..... 40 ..... gpm Bore Hole Diameter: ..... 8 ..... in. to ..... ft. and ..... in. to ..... ft.	<b>5 Latitude:</b> ..... (decimal degrees) <b>Longitude:</b> ..... (decimal degrees) <b>Horizontal Datum:</b> <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <input type="checkbox"/> GPS (unit make/model: .....) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: ..... <b>6 Elevation:</b> ..... ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC <b>Source:</b> <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other .....
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<b>7 WELL WATER TO BE USED AS:</b>		
1. Domestic: <input checked="" type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID ..... 6. <input type="checkbox"/> Dewatering: how many wells? ..... 7. <input type="checkbox"/> Aquifer Recharge: well ID ..... 8. <input type="checkbox"/> Monitoring: well ID ..... 9. Environmental Remediation: well ID ..... <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease ..... 11. Test Hole: well ID ..... <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? ..... a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): .....

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☒ No If yes, date sample was submitted: .....  
Water well disinfected? ☒ Yes ☐ No

**8 TYPE OF CASING USED:** ☐ Steel ☒ PVC ☐ Other ..... CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded  
Casing diameter ..... 5 ..... in. to ..... 53 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface ..... 12 ..... in. Weight ..... 2.8 ..... lbs./ft. Wall thickness or gauge No. Sch. 40

**TYPE OF SCREEN OR PERFORATION MATERIAL:**  
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☒ PVC ☐ Other (Specify) .....  
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)

**SCREEN OR PERFORATION OPENINGS ARE:**  
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) .....  
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☒ Saw Cut ☐ None (Open Hole)

**SCREEN-PERFORATED INTERVALS:** From ..... 53 ..... ft. to ..... 62 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From ..... 23 ..... ft. to ..... 46 ..... ft., From ..... 51 ..... ft. to ..... 62 ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....  
Grout Intervals: From ..... 0 ..... ft. to ..... 23 ..... ft., From ..... 46 ..... ft. to ..... 51 ..... ft., From ..... ft. to ..... ft.

**Nearest source of possible contamination:**  
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage  
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well  
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well  
☒ Other (Specify) metal shed  
Direction from well? North Distance from well? 72 ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	4	sandy top soil			
4	30	clay			
30	49	sand and gravel			
49	51	clay			
51	62	sand and gravel			
Notes:					

**11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year) 01/08/19 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 186 This Water Well Record was completed on (mo-day-year) 01/29/19 under the business name of Kelly's Water Well Service, Inc. Signature: *Kelly's Water Well Service, Inc.*