

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 SW ¼	Section Number 16	Township No. T 20 S	Range Number R 15 ☐ E ☒ W								
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ 2 3/4 North, 1/4 West of Pawnee Rock			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: Jav Essmiller RR#, Street Address, Box #: 893 SW 30th Road City, State, ZIP Code : Pawnee Rock, Ks. 67567													
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 25%;">NW</td> <td style="width: 25%;">NE</td> <td style="width: 25%;">SW</td> <td style="width: 25%;">SE</td> </tr> <tr> <td colspan="4"> W E </td> </tr> </table> S -----1 mile-----		NW	NE	SW	SE	W E				4 DEPTH OF COMPLETED WELL 110 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 10 ft. below land surface measured on mo/day/yr. 11-29-11..... 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 110 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										
W E													
5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded Casing diameter .5 in. to 110 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 110 ft. to 90 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 110 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 Hole plug Grout Intervals: From ft. to ft., From ft. to 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 ☐ None Direction from well Distance from well													
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS								
0	2	Top soil	106	110	Fire clay								
2	11	Tan clay											
11	22	Yellow shale- streaks of ironated sandstone											
22	46	Yellow & gray shlae											
46	52	Sandstone- dark, hard											
52	56	Gray shale											
56	71	Sanstone/ shale streaks											
71	86	Gray shale											
86	106	Sandstone											
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) 11-29-11 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) 12-9-11 under the business name of Rosencrantz-Bemis by (signature) <i>[Signature]</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 .													