

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Pawnee	Fraction ¼ SW ¼ SE ¼ NW ¼	Section Number 30	Township No. T 20 S	Range Number R 19 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .
6 North, 3 1/4 West of Rozel

Global Positioning System (GPS) information:
 Latitude: 38.28413..... (in decimal degrees)
 Longitude: 099.46851..... (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: Michael Burdett
 RR#, Street Address, Box #: 943 N Road
 City, State, ZIP Code : Lamed. KS 67550

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

N

NW	NE	E
SW	SE	S

1 mile

4 DEPTH OF COMPLETED WELL 232..... ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL 156..... ft. below land surface measured on mo/day/yr. 6-24-15.....
 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 232..... 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) Stock
 Irrigation Industrial Domestic-lawn & garden Monitoring well
 Was 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 Other.....
 CASING JOINTS: Glued Clamped Welded Threaded
 Casing diameter .5..... in. to 232..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
 Casing height above land surface...18..... in., Weight SDR-21..... 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 232..... ft. to 212..... ft., From..... ft. to..... ft.
 From 192..... ft. to 172..... ft., From..... ft. to..... ft.
 GRAVEL PACK INTERVALS: From 232..... 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 None
 Direction from well..... Distance from well.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	Top soil			
3	50	Yellow clay & limestone			
50	105	Black shale & limestone			
105	122	Dark gray shale & rock			
122	181	Gray shale			
181	189	Sandstone w/ shale streaks			
189	213	Fire clay			
213	219	Shale w/ sandstone streaks			
219	224	Sandstone			
224	232	Fire clay			

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) 7-23-15..... 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) 8-7-15.....
 under the business name of Rosencrantz- Bemis Ent Inc..... by (signature) [Signature].....

INSTRUCTIONS: Use typewriter or ball point pen. **PLEASE PRESS FIRMLY** and **PRINT** clearly. Please fill in blanks and check the correct answers. Send one copy 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. Include fee of \$5.00 for each constructed well. Visit us at