

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Greeley		Fraction ¼ SE ¼ SW ¼ SW ¼		Section Number 28	Township No. T 20 S	Range Number R 39 <input type="checkbox"/> E <input checked="" type="checkbox"/> W								
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 13 South and 6 West of Tribune				Global Positioning System (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m										
2 WATER WELL OWNER: Bill Klein RR#, Street Address, Box #: 609 Peters Ave. City, State, ZIP Code : Tribune, KS 67879														
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N <table border="1" style="width:100%; text-align: center; border-collapse: collapse;"> <tr><td colspan="2">W</td></tr> <tr><td>NW</td><td>NE</td></tr> <tr><td>SW</td><td>SE</td></tr> <tr><td colspan="2">E</td></tr> </table> S 1 mile		W		NW	NE	SW	SE	E		4 DEPTH OF COMPLETED WELL 250 ft. Depth(s) Groundwater Encountered (1) 185 ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr. Pump test data: Well water was ft. after hours pumping gpm EST. YIELD 8 gpm. Well water was ft. after hours pumping gpm Bore Hole Diameter 9 3/4 in. to ft., and in. to ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, mo/day/yr sample was submitted Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
W														
NW	NE													
SW	SE													
E														
5 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other Eagle Loc CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter 5 in. to 250 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in., Weight SDR 17 lbs./ft., Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input checked="" type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From 230 ft. to 250 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. From ft. to ft., From ft. to ft.														
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From 5 ft. to 30 ft., From 75 ft. to 80 ft., From ft. to ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input checked="" type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Direction from well South Distance from well 50														
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS									
0	24	Topsoil and Brown Clay	168	180	Sandy Clay									
24	43	Cliche Little Brown Sandy Clay	180	188	Fine to Medium Sand									
43	62	Sand Medium With Brown Clay	188	193	Sandy Clay									
62	64	Red Rock	193	208	Fine Sand to Medium									
64	73	Sand Medium With White Clay	208	212	Clay									
73	80	White Sandy Clay	212	228	Fine Sand									
80	103	Sand Medium to Coarse	228	235	Yellow Clay Few Sand Streaks									
103	105	Brown Rock	235	242	Yellow Clay									
105	147	Sandy Clay	242	250	Blue Clay									
147	168	Sand Medium Lt Clay												
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 8-3-10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 473 This Water Well Record was completed on (mo/day/year) 8-30-10 under the business name of Tyler Well Serve by (signature) 														
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 .														