

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Pawnee		Fraction NW $\frac{1}{4}$ SE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 32	Township Number T 21 \textcircled{S}	Range Number R 16 \textcircled{EW}																
Distance and direction from nearest town or city street address of well if located within city? 1006 Broadway, Larned, KS 67550			Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: $38^{\circ} 11' 02.22'' N$ Longitude: $99^{\circ} 05' 53'' W$ Elevation: $2003.04 AUL$ Datum: _____ Data Collection Method: <u>Google Earth</u>																		
2 WATER WELL OWNER: Micael Hickel RR#, St. Address, Box # RR #1 Box 146b City, State, ZIP Code Larned, KS 67550																					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1" style="width:100%; text-align: center; border-collapse: collapse;"> <tr><td>W</td><td>--NW--</td><td>--NE--</td><td>E</td></tr> <tr><td></td><td></td><td>X</td><td></td></tr> <tr><td></td><td>--SW--</td><td>--SE--</td><td></td></tr> <tr><td>S</td><td></td><td></td><td></td></tr> </table>		W	--NW--	--NE--	E			X			--SW--	--SE--		S				4 DEPTH OF COMPLETED WELL 29.90 ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL 21.82 ft. below land surface measured on mo/day/yr 11/30/07 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn& garden) <u>10 Monitoring well</u> Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr Sample was submitted _____ Water well disinfected? Yes _____ No <u>X</u>			
W	--NW--	--NE--	E																		
		X																			
	--SW--	--SE--																			
S																					
5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) CASING JOINTS: Glued _____ Clamped _____ <u>PVC</u> 4 ABS 7 Fiberglass _____ Welded _____ Blank casing diameter <u>2"</u> in. to <u>9.90</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface <u>2</u> in., Weight <u>SCH 40</u> lbs./ft. Wall thickness or gauge No. _____ TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <u>7 PVC</u> 9 ABS 11 Other (Specify) _____ 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot <u>3 Mill slot</u> 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From <u>29.90</u> ft. to <u>9.90</u> ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <u>30</u> ft. to <u>7.5</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.																					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>6 Bentonite</u> 4 Other <u>Cement</u> Grout Intervals: From <u>7.5</u> ft. to <u>1'</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) <u>None</u> 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well Direction from well? _____ How many feet? _____																					
FROM TO LITHOLOGIC LOG			FROM TO PLUGGING INTERVALS																		
0	0.5'	Concrete																			
0.5'	15'	Silt:																			
15'	17"	Silt with clay																			
17'	30'	Fine-medium, poorly sorted sand																			
					MW-15																
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>11/15/07</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>665</u> This Water Well Record was completed on (mo/day/year) <u>12/6/07</u> under the business name of <u>Pratt Well Service, Inc.</u> by (signature) <u>[Signature]</u> INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612- 1 367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdhe.state.ks.us/geo/waterwells .																					