

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

20100018

1 LOCATION OF WATER WELL: County: Pawnee		Fraction SE ¼ NE ¼ NW ¼	Section Number 25	Township Number T 21 S	Range Number R 16W E/W															
Distance and direction from nearest town or city street address of well if located within city? 2 1/2E of Larned, KS			Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																	
2 WATER WELL OWNER: Ward Feed Yard RR#, St. Address, Box # : P.O. Box 1506 City, State, ZIP Code : Great Bend, KS 67530																				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W <table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td></td><td></td><td></td></tr> <tr><td>-- NW --</td><td>X</td><td>-- NE --</td></tr> <tr><td></td><td></td><td></td></tr> <tr><td>-- SW --</td><td></td><td>-- SE --</td></tr> <tr><td></td><td></td><td></td></tr> </table> E S					-- NW --	X	-- NE --				-- SW --		-- SE --				4 DEPTH OF COMPLETED WELL 35 ft. Depth(s) Groundwater Encountered (1).....15..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL.....15..... ft. below land surface measured on mo/day/yr. 02/02/10.. Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield..60...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) 10 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			
-- NW --	X	-- NE --																		
-- SW --		-- SE --																		
5 TYPE OF CASING USED:																				
1 Steel 3 RMP (SR)		5 Wrought Iron 8 Concrete tile		CASING JOINTS: Glued..... Clamped.....																
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded.....																
7 Fiberglass				Threaded.....																
Blank casing diameter ...5..... in. to ...20..... ft., Diameter..... in. to ft., Diameter..... in. to ft.																				
Casing height above land surface.....12..... in., Weight2.8.....lbs./ft. Wall thickness or guage No. Sch...40.....																				
TYPE OF SCREEN OR PERFORATION MATERIAL:																				
1 Steel 3 Stainless Steel 5 Fiberglass		7 PVC 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 3 Mill slot 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...20..... ft. to ...35..... ft., From..... ft. to ft.																				
From..... ft. to ft., From..... ft. to ft.																				
GRAVEL PACK INTERVALS: From...20..... ft. to ...35..... ft., From..... ft. to ft.																				
From..... ft. to ft., From..... ft. to ft.																				
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other																				
Grout Intervals: From ...0..... ft. to ...20..... 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)																
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?South..... How many feet? ...100.....																				
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS															
0	1	top soil																		
1	5	clay			WFY Unit #1															
5	35	sand and gravel clay bottom																		
					Sterling Drilling Company															
					P.O. Box 1006															
					Pratt, KS 67124															
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 02/02/10 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) ...02/02/10..... under the business name of Kelly's Water Well Service, Inc. by (signature) <i>Kathryn R. Hood</i>																				
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. 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.kdheks.gov/waterwell/index.html .																				