

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Finney</u>	Fraction <u>NW 1/4 NW 1/4 SE 1/4</u>	Section Number <u>4</u>	Township Number T <u>21</u> S	Range Number R <u>32</u> (W)
Distance and direction from nearest town or city street address of well if located within city?		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		

2 WATER WELL OWNER: Unger Heating & Air
RR#, St. Address, Box # : 109 N. 8th
City, State, ZIP Code : Garden City, KS 67846

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> </td><td> </td><td> </td></tr><tr><td>--NW--</td><td>--NE--</td><td> </td></tr><tr><td> </td><td>X</td><td> </td></tr><tr><td>--SW--</td><td>--SE--</td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table> S				--NW--	--NE--			X		--SW--	--SE--					4 DEPTH OF COMPLETED WELL ... <u>200'</u> x <u>4</u> ... ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... <u>N/A</u> ft. below land surface measured on <u>6-28-07</u> . 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 <input checked="" type="checkbox"/> 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 <u>Geo-thermal loop</u> Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes No
--NW--	--NE--															
	X															
--SW--	--SE--															

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued..... Clamped.....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....
2 PVC 4 ABS 7 Fiberglass Threaded.....

Blank casing diameter 3/4" X 2 pss in. to 300..... ft., Diameter..... in. to ft., Diameter..... in. to ft.
Casing height above land surface..... in., Weight lbs./ft. Wall thickness or gauge No.

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 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..... ft. to 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: 1 Neat cement 2 Cement grout Bentonite 4 Other

Grout Intervals: From 0..... ft. to 203..... ft., From Sand Mike..... ft. to ft., From..... ft. to ft.

What is the nearest source of possible contamination:
 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well

Direction from well? How many feet? 100.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	top soil	99	102	coarse sand, small gravel, brown clay
2	12	fine sand	102	105	brown clay
12	38	brown clay	105	122	yellow shale
38	41	gypsum	122	200	black shale
41	52	brown clay			
52	71	med. to coarse sand, small gravel			
71	73	clay			
73	78	cemented sand, brown clay streaks			
78	82	coarse sand, small gravel, broken rock			
82	99	brown clay, few sand streaks			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6-28-07 and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 532 This Water Well Record was completed on (mo/day/year) 7-1-07
under the business name of Midwest Well & Pump Inc by (signature) John M. Sawyer

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>.