

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Hodgeman</u>		<u>SE 1/4 SE 1/4 SW 1/4</u>	<u>9</u>	T <u>23</u> S	R <u>26</u> E <u>(W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>From Kalvesta, 4 miles east on Hwy 156 to County line then 2 1/2 miles east on Rd.</u>			Global Positioning Systems (decimal degrees, min. of 4 digits)		
			Latitude: _____		
			Longitude: _____		
			Elevation: _____		
			Datum: _____		
			Data Collection Method: _____		

2 WATER WELL OWNER:		4 DEPTH OF COMPLETED WELL <u>445</u> ft.																	
Brent Nash																			
RR#, St. Address, Box # : <u>1009 25 Rd.</u>																			
City, State, ZIP Code : <u>Cimarron, KS 67835</u>																			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.																	
<div style="text-align: center;"> <table border="1"> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>-- NW --</td> <td></td> <td>-- NE --</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>-- SW --</td> <td></td> <td>-- SE --</td> <td></td> </tr> </table> </div>						-- NW --		-- NE --						-- SW --		-- SE --		WELL'S STATIC WATER LEVEL..... <u>298</u> ft. below land surface measured on mo/day/yr..... <u>9-26-05</u>	
-- NW --		-- NE --																	
-- SW --		-- SE --																	
		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																	
		<input checked="" type="radio"/> 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 <input checked="" type="checkbox"/> ; If yes, mo/day/yr																	
		Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No																	

5 TYPE OF CASING USED:		5 Wrought Iron		8 Concrete tile		CASING JOINTS: Glued..... <input checked="" type="checkbox"/> Clamped.....	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		Welded.....	
<input checked="" type="radio"/> VC		4 ABS		7 Fiberglass		Threaded.....	
Blank casing diameter <u>5</u> in. to <u>365</u> ft., Diameter. in. to ft., Diameter in. to ft.							
Casing height above land surface..... <u>12</u> in., Weight.....lbs./ft.				Wall thickness or guage No. <u>SOR 2.1</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless Steel		5 Fiberglass		<input checked="" type="radio"/> PVC	
2 Brass		4 Galvanized Steel		6 Concrete tile		8 RM (SR)	
						10 Asbestos-Cement	
						11 Other (Specify)	
						12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:							
1 Continuous slot		3 Mill slot		5 Guazed wrapped		7 Torch cut	
2 Louvered shutter		4 Key punched		6 Wire wrapped		<input checked="" type="radio"/> Saw Cut	
						10 Other (specify)	
						11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From..... <u>365</u> ft. to <u>445</u> ft., From ft. to ft.							
GRAVEL PACK INTERVALS: From..... <u>24</u> ft. to <u>355</u> ft., From <u>365</u> ft. to <u>445</u> ft.							

6 GROUT MATERIAL:		1 Neat cement		2 Cement grout		<input checked="" type="radio"/> Bentonite		4 Other	
Grout Intervals: From <u>4</u> ft. to <u>24</u> ft., From <u>355</u> ft. to <u>365</u> 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	
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	
								16 Other (specify below) <u>In Pasture</u>	
Direction from well?					How many feet?				

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>2</u>	<u>Topsoil</u>			
<u>2</u>	<u>25</u>	<u>Tan clay</u>			
<u>25</u>	<u>30</u>	<u>Brown sand</u>			
<u>30</u>	<u>55</u>	<u>White rock & caliche</u>			
<u>55</u>	<u>130</u>	<u>Shale</u>			
<u>130</u>	<u>235</u>	<u>Sandstone</u>			
<u>235</u>	<u>240</u>	<u>Shale</u>			
<u>240</u>	<u>268</u>	<u>Sandstone</u>			
<u>268</u>	<u>365</u>	<u>Shale</u>			
<u>365</u>	<u>445</u>	<u>Sandstone & shale layers</u>			

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) 9-26-05 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 533 This Water Well Record was completed on (mo/day/year) 12-20-05 under the business name of Tantern Water Well by (signature) [Signature]

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.kdhe.state.ks.us/geo/waterwells>.