

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Harvey</u>		Fraction <u>NE 1/4 NE 1/4 SE 1/4</u>		Section Number <u>30</u>	Township Number <u>T 24 S</u>	Range Number <u>R 1 E W</u>															
Distance and direction from nearest town or city street address of well if located within city? <u>9025 S. Mission Road E/2 Feedyard</u>				Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																	
2 WATER WELL OWNER: <u>Wilbur Karr</u> RR#, St. Address, Box #: <u>9025 S Mission Road</u> City, State, ZIP Code: <u>Sedgewick, KS 67135</u>																					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center; margin-right: 10px;">W</div> <table border="1" style="border-collapse: collapse; text-align: center;"> <tr><td> </td><td> </td><td> </td></tr> <tr><td>-- NW --</td><td>-- NE --</td><td> </td></tr> <tr><td> </td><td> </td><td style="text-align: right;">E</td></tr> <tr><td>-- SW --</td><td>-- SE --</td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> <div style="text-align: center; margin-left: 10px;">S</div> </div>					-- NW --	-- NE --				E	-- SW --	-- SE --					4 DEPTH OF COMPLETED WELL <u>90</u> ft. Depth(s) Groundwater Encountered (1) <u>27</u> ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL <u>27</u> ft. below land surface measured on mo/day/yr. Pump test data: Well water was ft. after hours pumping gpm Est. Yield. <u>50</u> 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 <input checked="" type="checkbox"/> 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				
-- NW --	-- NE --																				
		E																			
-- SW --	-- SE --																				
5 TYPE OF CASING USED:																					
1 Steel		3 RMP (SR)		5 Wrought Iron		8 Concrete tile															
1 <input checked="" type="radio"/> PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)															
				7 Fiberglass																	
Blank casing diameter <u>5</u> in. to <u>50</u> ft., Diameter in. to ft., Diameter in. to ft.																					
Casing height above land surface <u>36</u> in., Weight <u>2.5</u> lbs./ft. Wall thickness or gauge No. <u>SPR 26</u>																					
TYPE OF SCREEN OR PERFORATION MATERIAL:																					
1 Steel		3 Stainless Steel		5 Fiberglass		9 ABS															
2 Brass		4 Galvanized Steel		6 Concrete tile		11 Other (Specify)															
				8 RM (SR)		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		9 Drilled holes															
				10 Saw Cut		11 None (open hole)															
SCREEN-PERFORATED INTERVALS: From <u>50</u> ft. to <u>90</u> ft., From ft. to ft.																					
From ft. to ft., From ft. to ft.																					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>90</u> ft., From ft. to ft.																					
From ft. to ft., From ft. to ft.																					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> Bentonite 4 Other																					
Grout Intervals: From <u>3</u> ft. to <u>20</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															
2 Sewer lines		5 Cess pool		8 Sewage lagoon		13 Insecticide Storage															
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		14 Abandoned water well below															
				12 Fertilizer Storage		15 Oil well/gas well															
Direction from well? <u>West</u> How many feet? <u>100</u>																					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS																
<u>0</u>	<u>10</u>	<u>Brown Clay</u>																			
<u>10</u>	<u>25</u>	<u>Grey Clay</u>																			
<u>25</u>	<u>30</u>	<u>Medium Sand</u>																			
<u>30</u>	<u>35</u>	<u>Grey Clay</u>																			
<u>35</u>	<u>50</u>	<u>Medium Sand</u>																			
<u>50</u>	<u>65</u>	<u>Medium Sand to Small Gravel</u>																			
<u>65</u>	<u>90</u>	<u>Small Sand w/ clay streaks</u>																			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>8-10-06</u> and this record is true to the best of my knowledge and belief.																					
Kansas Water Well Contractor's License No. <u>238</u> This Water Well Record was completed on (mo/day/year) <u>8-18-06</u> under the business name of <u>Premier Pump & Well Serv.</u> by (signature) <u>Walter Wenzinger</u>																					
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 .																					