

## WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. 27342

<b>1 LOCATION OF WATER WELL:</b>		Fraction County: <b>Kearny</b> NW ¼    SE ¼ <u>NE</u> ¼		Section Number <b>18</b>	Township Number T <b>25</b> S	Range Number R <b>35</b> E <u>W</u>
Distance and direction from nearest town or city street address of well if located within city? From Lakin, appx 4 miles South & 3 Miles East				Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>37.8828</u> Longitude: <u>101.1986</u> Elevation: <u>3030</u> Datum: _____ Data Collection Method: _____		
<b>2 WATER WELL OWNER: Glen Johnson</b> RR#, St. Address, Box # : RR2 Box 320 City, State, ZIP Code : Lakin KS 67860						
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF COMPLETED WELL 566</b> ft.				
<div style="text-align: center;"> </div>		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <u>166</u> ft. below land surface measured on mo/day/yr <u>02/27/08</u> Pump test data: Well water was <u>370</u> ft. after <u>4</u> hours pumping <u>1329</u> gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 _____ 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <u>2</u> Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well				
		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 <u>x</u> No _____				
		<b>5 TYPE OF CASING USED:</b> 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded <u>x</u> 2 PVC 4 ABS 7 Fiberglass Threaded _____				
		Blank casing diameter <u>16</u> in. to <u>566</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface <u>12</u> in., Weight <u>42</u> lbs./ft. Wall thickness or gauge No. <u>.250</u>				
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> 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)						
<b>SCREEN OR PERFORATION OPENINGS ARE:</b> 1 Continuous slot 3 Mill slot 5 Gauge 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) _____						
<b>SCREEN-PERFORATED INTERVALS:</b> From <u>205</u> ft. to <u>285</u> ft. From <u>326</u> ft. to <u>346</u> ft. From <u>371</u> ft. to <u>561</u> ft. From _____ ft. to _____ ft. <b>GRAVEL PACK INTERVALS:</b> From <u>20</u> ft. to <u>566</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.						
<b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals From <u>0</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 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? <u>West</u> How many feet? <u>244</u>						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	2	Top Soil Sand				
2	16	Sand fine				
16	37	Sand fine to med course small to large gravel				
37	54	Sandy Clay				
54	140	Sand fine to med course small gravel				
140	155	Sand fine some clay stringers				
155	160	Sand fine to med course				
160	187	Sandy clay w/ sand beds				
187	241	Sand fine to med course strips of small gravel				
241	260	Sandy clay w/sand beds				
260	285	Sand fine to med				
285	325	Sandy clay w/fine sand				
325	346	Sand fine to med				
346	370	Sandy Clay				
370	407	Sand fine to med				

407	414	Soap stone			
414	435	Sand stone			
435	468	Soap stone, sand stone			
468	490	Sand Stone			
490	495	Soap stone w/ sand stone			
495	561	Sand Stone w/soap stone			
561	570	Shale			

**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) 02/22/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 145. This Water Well Record was completed on (mo/day/year) 05/27/08 under the business name of Henkle Drilling & Supply Co, Inc. by (signature) Bruce J. Henkle.

**INSTRUCTIONS:** Please fill in blanks 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>.