

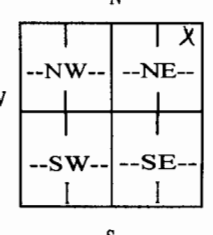
WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

20090011

1 LOCATION OF WATER WELL: County: Pratt		Fraction NE $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 23	Township Number T 26 S	Range Number R 11 E/W
Distance and direction from nearest town or city street address of well if located within city? NE 90th Street & NE 140th Avenue			Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Ronald Schwertfeger RR#, St. Address, Box # 210 N. Main City, State, ZIP Code Turon, KS 67583					

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  S	4 DEPTH OF COMPLETED WELL 115 ft.	
	Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <sup>31</sup> _____ ft. below land surface measured on mo/day/yr 1/9/09 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 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 <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 _____	
I Steel 3 RMP (SR)		6 Asbestos-Cement	9 Other (specify below)	Welded _____	
2 PVC 4 ABS		7 Fiberglass		Threaded _____	
Blank casing diameter <sup>5</sup> _____ in. to <sup>98</sup> _____ ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.					
Casing height above land surface <sup>3</sup> _____ in., Weight SCH 160 _____ lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
I 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 <sup>115</sup> _____ ft. to <sup>95</sup> _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <sup>115</sup> _____ ft. to <sup>75</sup> _____ ft., From _____ ft. to _____ ft.					

6 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____
Grout Intervals: From <sup>75</sup> _____ ft. to <sup>0</sup> _____ 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? IMMEDIATE VICINITY			How many feet? IMMEDIATE VICINITY		

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0'	5'	Topsoil, sandy			
5'	35'	Clay			
35'	45'	Fine sand			
45'	50'	Medium Sand, Clay			
50'	70'	Small Sand			
70'	75'	Clay			
75'	110'	Small to Medium Gravel, clay			
110'	117'	Weathered Shale, clay			

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) 1/9/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 1/21/09 under the business name of Pratt Well Service, Inc. by (signature) *Alton G. ...*

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, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612- 1 367. 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>.