

WATER WELL RECORD

Form WWC-5

1 LOCATION OF WATER WELL: County: <u>Pratt</u>	Fraction <u>NC 1/4 SE 1/4 NE 1/4</u>	Section Number <u>9</u>	Township Number <u>T 26 S</u>	Range Number <u>R 13 E</u> (W)
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Distance and direction from nearest town or city street address of well if located within city? Approximately 4 3/4 miles north of luka

Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: 37.800881
 Longitude: -98.742248
 Elevation: unknown
 Datum: NAD 83
 Data Collection Method: WAAS GPS Unit

2 WATER WELL OWNER: Lois A. Griffith Jr. Living Trust
 RR#, St. Address, Box # : c/o James W. Griffith
235 NE 110th St.
 City, State, ZIP Code : luka, KS 67066-9530

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
--NW--		--NE--	X
--SW--		--SE--	
S			

4 DEPTH OF COMPLETED WELL 108.4 ft.

Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.

WELL'S STATIC WATER LEVEL 43 ft. below land surface measured on mo/day/yr 5-19-06

Pump test data: Well water was not checked ft. after _____ hours pumping _____ gpm

Est. Yield unknown 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 If yes, mo/day/yr _____

Sample was submitted _____ Water well disinfected? Yes _____ No

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 16 in. to 57.8 ft., Diameter 16 in. to 87.3 ft., Diameter _____ in. to _____ ft.

Casing height above land surface 13 in., weight 16.15 lbs./ft. Wall thickness or gauge No. .500

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 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 57.8 ft. to 85.8 ft., From _____ ft. to _____ ft.
 From 87.3 ft. to 107.3 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 21 ft. to 108 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat Cement **(2)** Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From 0 ft. to 21 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 None known
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Topsoil	90	108	Clay, sandy with sand
5	12	Clay, brown, sandy			
12	46	Clay, brown, sandy, hard			
46	64	Sand and gravel, fine, medium, coarse, some very coarse			
64	66	Clay, brown			
66	68	Clay with sand and gravel			
68	79	Sand and gravel, fine, medium, coarse			
79	83	Cemented sand, very hard			
83	85	Sand and gravel with clay			
85	90	Clay with limestone pieces			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **(1)** constructed **(2)** reconstructed **(3)** plugged under my jurisdiction and was completed on (mo/day/year) 5-19-06 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 6-2-06

Under the business name of Clarke Well & Equipment, Inc. 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.