WATER WELL RECORD Form WWC-5

Division of Water Resources; App. No. **20080467**

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Pratt	NE ¼ NE ¼ NW ¼	22	T 26 S	R 13w E/W

Distance and direction from nearest town or city street address of well if located within city?
3N of Iuka, KS

Global Positioning Systems (decimal degrees, min. of 4 digits)
Latitude: _____
Longitude: _____
Elevation: _____
Datum: _____
Data Collection Method:

2 WATER WELL OWNER: Warren Meireis
RR#, St. Address, Box # : 80097 NE 140th Ave.
City, State, ZIP Code : Prestone, KS 67583

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

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        N
   ┌────┬────┐
   │ X  │    │
 --NW-- --NE--
W  │    │    │  E
   ├────┼────┤
 --SW-- --SE--
   │    │    │
   └────┴────┘
        S
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4 DEPTH OF COMPLETED WELL …………………………….. 125 ft.

Depth(s) Groundwater Encountered (1)……40…… ft. (2)……………. ft. (3)………………. ft.
WELL'S STATIC WATER LEVEL…..40…….ft. below land surface measured on mo/day/yr…10/21/08.
Pump test data: Well water was………..….ft. after…..…………. hours pumping…..…………. gpm
Est. Yield..80…..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/yrs
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 …..5…….. in. to …105…….. ft., Diameter. …………. in. to …………. ft., Diameter ………….. in. to ………….ft.
Casing height above land surface………12………… in., Weight …2.8……….lbs./ft.   Wall thickness or guage No. Sch,.40…………
TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel   3 Stainless Steel   5 Fiberglass   7 PVC   9 ABS   11 Other (Specify) …………………….
2 Brass   4 Galvanized Steal   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…..105……… ft. to …125…………. ft., From ………………….. ft. to …………..…….. ft.
From……………… ft. to ……………. ft., From ………………….. ft. to …………..…….. ft.
GRAVEL PACK INTERVALS: From……20……… ft. to ….81………. ft., From ……84………. ft. to ……125……….. 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 ….20……. ft., From 81………. ft. to ….84…….. 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
2 Sewer lines   5 Cess pool   8 Sewage lagoon   11 Fuel storage   14 Abandoned water well   below)
3 Watertight sewer lines   6 Seepage pit   9 Feedyard   12 Fertilizer storage   15 Oil well/gas well   …………………….
Direction from well? …North…………   How many feet? …122………………………

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	top sand			
2	24	clay			M G unit #1
24	62	sand and gravel			
62	90	clay			Sterling Drilling Company
90	125	sand and gravel clay bottom			P. O. Box 1006
					Pratt, KS 67124

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) 10/21/08….. and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. …..186….. This Water Well Record was completed on (mo/day/year) .11/11/08…………
under the business name of Kelly's Water Well Service, Inc. by (signature) *Kathryn R Good*

KSA 82a-1212