

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. 6574, 14679

1 LOCATION OF WATER WELL: Fraction <u>Lot 2 SW 1/4</u>		Section Number <u>7</u>	Township Number <u>T 26 S</u>	Range Number <u>R 27 E</u>	
County: <u>Gray</u>		Global Positioning System (decimal degrees, min. of 4 digits)			
Distance and direction from nearest town or city street address of well if located within city? From Cimarron appx 1/2 miles South & 2 Miles West		Latitude: <u>37.80529</u>			
2 WATER WELL OWNER: <u>DM & M Farms</u>		Longitude: <u>100.32292</u>			
RR#, St. Address, Box # : <u>PO Box 668</u>		Elevation: <u>2624</u>			
City, State, ZIP Code : <u>Cimarron KS 67835</u>		Datum: _____			
		Data Collection Method: _____			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF COMPLETED WELL <u>243</u> ft.				
	Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.				
	WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr				
	Pump test data: Well water was _____ ft. after <u>4</u> hours pumping _____ 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)		2 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 _____			
5 TYPE OF CASING USED:		CASING JOINTS: Glued _____ Clamped _____			
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) _____		Welded _____ X _____			
2 PVC 4 ABS 7 Fiberglass _____		Threaded _____			
Blank casing diameter <u>16</u> in. to <u>243</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>			
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 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) _____					
SCREEN-PERFORATED INTERVALS: From <u>139</u> ft. to <u>209</u> ft. From <u>223</u> ft. to <u>233</u> ft.					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>243</u> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 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>NW</u>		How many feet? <u>292</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top soil			
2	18	Clay cemented sand			
18	31	Clay			
31	44	Sand fine to med course			
44	50	Sand fine			
50	82	Clay lime rock cemented sand			
82	102	Sand fine to med course			
102	111	Sand fine to med w/ thin clay			
111	139	Clay few sand			
139	189	Sand fine to med course w/gravel			
189	207	Sand fine to med w/rock			
207	220	clay			
220	233	Sand stone soap stone few shale			
233	245	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) 04/23/08 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) 06/13/08 under the business name of Hemkle Drilling & Supply Co, Inc. by (signature) Brian R. Hemkle.

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>.