

# WATER WELL RECORD

## Form WWC-5

Division of Water Resources; App. No. \_\_\_\_\_

<b>1 LOCATION OF WATER WELL:</b>		Fraction <b>NW ¼ NW ¼ SW ¼</b>		Section Number <b>29</b>	Township Number <b>T 26 S</b>	Range Number <b>R 33 E/W</b>									
County: <b>Finney</b>				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? <b>13 mi. south, 5 west &amp; ½ south of Garden City</b>				Latitude: <b>37° 45' 20.6"</b>											
				Longitude: <b>100° 57' 41.7"</b>											
				Elevation: <b>2961</b>											
				Datum: _____											
				Data Collection Method: _____											
<b>2 WATER WELL OWNER: Steve Stone</b>		<b>4 DEPTH OF COMPLETED WELL 495 ft.</b>													
RR#, St. Address, Box # : <b>10925 S., Sandhill Rd.</b>															
City, State, ZIP Code : <b>Garden City KS 67846</b>															
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<p>Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.</p> <p>WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr _____</p> <p>Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm</p> <p>Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm</p> <p>WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well</p> <p>1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)</p> <p>2 Irrigation 4 Industrial 7 Domestic (lawn &amp; garden) 10 Monitoring well</p> <p>Was a chemical/bacteriological sample submitted to Department? Yes _____ No <b>x</b> ; If yes, mo/day/yr _____</p> <p>Sample was submitted _____ Water Well Disinfected? Yes <b>x</b> No _____</p>													
<p>N</p> <table border="1" style="margin: auto; text-align: center;"> <tr><td></td><td></td><td></td></tr> <tr><td>NW</td><td>X</td><td>NE</td></tr> <tr><td>SW</td><td></td><td>SE</td></tr> </table> <p>W S</p>					NW	X	NE	SW		SE					
NW	X	NE													
SW		SE													
<b>5 TYPE OF CASING USED:</b>		<p>5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____</p> <p>1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____</p> <p>2 PVC 4 ABS 7 Fiberglass _____ <b>Certa-Loc</b> Threaded _____</p> <p>Blank casing diameter <b>5</b> in. to <b>495</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.</p> <p>Casing height above land surface <b>24</b> in., Weight _____ lbs./ft. Wall thickness or gauge No. <b>SDR 17</b></p> <p>TYPE OF SCREEN OR PERFORATION MATERIAL:</p> <p>1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) _____</p> <p>2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)</p> <p>SCREEN OR PERFORATION OPENINGS ARE:</p> <p>1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)</p> <p>2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____</p> <p>SCREEN-PERFORATED INTERVALS: From <b>355</b> ft. to <b>375</b> ft. From <b>415</b> ft. to <b>435</b> ft.</p> <p>GRAVEL PACK INTERVALS: From <b>475</b> ft. to <b>495</b> ft. From _____ ft. to _____ ft.</p> <p>From <b>30</b> ft. to <b>495</b> ft. From _____ ft. to _____ ft.</p> <p>From _____ ft. to _____ ft. From _____ ft. to _____ ft.</p>													
<b>6 GROUT MATERIAL:</b>		<p>1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____</p> <p>Grout Intervals From <b>7</b> ft. to <b>30</b> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.</p> <p>What is the nearest source of possible contamination:</p> <p>1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below)</p> <p>2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well</p> <p>3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well <b>None observed</b></p> <p>Direction from well? _____ How many feet? _____</p>													
FROM TO LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS													
0	60	Fine sand & a little clay	462	470	Brown clay										
60	240	Sand & gravel, med to coarse; clay strks	470	490	Med sand & clay streaks										
240	252	Brown clay	490	500	Yellow clay & shale										
252	321	Fine to coarse sand & gravel; clay strks													
321	336	Sandy clay													
336	348	Sand, med													
348	363	Sandy clay													
363	375	Fine to med cemented sand													
375	455	Brown sandy clay; caliche streaks													
455	462	Med sand													
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>10-1-08</b> and this record is true to the best of my knowledge and belief.															
Kansas Water Well Contractor's License No. <b>473</b> . This Water Well Record was completed on (mo/day/year) <b>10-4-08</b>															
under the business name of <b>Tyler Water Well, Inc.</b> by (signature) <i>Daniel J. S.</i>															
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 <a href="http://www.kdheks.gov/waterwell">http://www.kdheks.gov/waterwell</a> .															