

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: <u>Finney</u> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> . <u>1 Mile West 1 Mile South of Plymell</u>	Fraction $\frac{1}{4}$ SE $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number <u>14</u>	Township No. <u>T 26 S</u>	Range Number <u>R 33</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W						
2 WATER WELL OWNER: <u>Mike Deaver</u> RR#, Street Address, Box #: <u>11215 S. West Fork Rd</u> City, State, ZIP Code : <u>Garden City KS 67846</u>		Global Positioning System (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m								
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 25%;">NW</td> <td style="width: 25%;">NE</td> <td style="width: 25%;">E</td> </tr> <tr> <td style="width: 25%;">SW</td> <td style="width: 25%;">SE</td> <td style="width: 25%;">S</td> </tr> </table> W S -----1 mile-----	NW	NE	E	SW	SE	S	4 DEPTH OF COMPLETED WELL <u>480</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..... hours pumping..... gpm EST. YIELD.....gpm. Well water was.....ft. after..... hours pumping..... gpm Bore Hole Diameter <u>9 3/4</u>in. toft., andin. toft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
NW	NE	E								
SW	SE	S								
5 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other <u>Eagle Loc</u> CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter <u>.5</u>in. to <u>480</u>ft., Diameterft., Diameterin. toft. Casing height above land surface... <u>24</u>in., Weight <u>SDR 17</u>lbs./ft., Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input checked="" type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From <u>365</u>ft. to <u>385</u>ft., From <u>405</u>ft. to <u>425</u>ft. From <u>460</u>ft. to <u>480</u>ft., Fromft. toft. GRAVEL PACK INTERVALS: From <u>30</u>ft. to <u>480</u>ft., Fromft. toft. Fromft. toft., Fromft. toft.										
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From <u>8</u>ft. to <u>10</u>ft., From <u>Ben 10</u>ft. to <u>30</u>ft., Fromft. toft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Direction from well Distance from well										
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS					
0	35	Topsoil and Brown Sandy Clay	163	180	Sand Fine to Med					
35	40	Brown Sandy Clay Little Fine Sand	180	196	Gray Clay and Sandstone					
40	50	Sand Little Clay & Cliche	196	280	Sand Little Clay and Cliche					
50	86	Sand and Gravel Little Clay & Clich	280	290	Cliche and Clay					
86	106	Brown Sandy Clay	290	370	Sand Fine to Med w Clay and Cliche					
106	115	Sand and Gravel	370	380	Cliche and Clay					
115	117	Cliche	380	464	Sand and Clay Mix					
117	124	Brown Sandy Clay Little Cliche	464	470	Yellow Clay					
124	140	Sand & Clay Streaks	470	480	Gray Clay					
140	163	Brown Clay								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) <u>7/15/10</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>473</u> This Water Well Record was completed on (mo/day/year) <u>7/21/10</u> under the business name of <u>Tyler Water Well</u> by (signature) <u>[Signature]</u>										
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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 copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html .										

KSA 82a-1212

Original Returned to Sender
for Correction Date: 7/29/10

Check: ☒ White Copy, ☐ Blue Copy, ☐ Pink Copy