

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Pratt	Fraction NW ¼ SE ¼ ¼ ¼	Section Number 25	Township No. T 27 S	Range Number R 11 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .
2700 LF NW of the intersection of NE 10th street and NW 190th Ave.

Global Positioning System (GPS) information:
Latitude: .37.6656 N..... (in decimal degrees)
Longitude: 98.4709 W..... (in decimal degrees)
Elevation: 551.....
Datum: WGS 84, NAD 83, NAD 27
Collection Method:
 GPS unit (Make/Model:)
 Digital Map/Photo, Topographic Map, Land Survey
Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m

2 WATER WELL OWNER: Glenn Sessions and Sons, Inc.
RR#, Street Address, Box #: PO Box 1076
City, State, ZIP Code : Walden, CO 80480

3 LOCATE WELL WITH AN "X" IN SECTION BOX:
N

W	E
NW	NE
SW	SE X
S	S

-----1 mile-----

4 DEPTH OF COMPLETED WELL 44..... ft.
Depth(s) Groundwater Encountered (1) 12..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL 7..... ft. below land surface measured on mo/day/yr. 11/16/13.....
Pump test data: Well water was..... ft. after..... hours pumping..... gpm
EST. YIELD 400..... gpm. Well water was..... ft. after..... hours pumping..... gpm
Bore Hole Diameter 32..... in. to..... ft., and..... in. to..... ft.
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below)
 Irrigation Industrial Domestic-lawn & garden 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: Steel PVC Other
CASING JOINTS: Glued Clamped Welded Threaded
Casing diameter 12..... in. to..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
Casing height above land surface 12..... in., Weight..... lbs./ft., Wall thickness or gauge No.
TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel PVC Other (Specify)
 Brass Galvanized Steel None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
 Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify)
SCREEN-PERFORATED INTERVALS: From 24..... ft. to 44..... ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.
GRAVEL PACK INTERVALS: From..... ft. to..... ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
Grout Intervals: From 3..... ft. to 12..... ft., From..... ft. to..... ft., From..... ft. to..... ft.
What is the nearest source of possible contamination:
 Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)
 Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well
Direction from well Distance from well

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
1	4	Sand with Clay	0	3	Native Compacted Soil
4	14	Fine to medium Sand	3	7	Bentonite
14	15	Blue soft Clay	12	44	native material
15	26	Medium sand with some clay			
26	31	Hard Black Clay			Well casing was pulled and allowed
31	35	1/4" Gravel			to collapse to the static water
35	44	Hard Clay			table.
		Drilled 5 wells-10/18/13			Abandoned Wells 11/6/13

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 7/9/13..... and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 509..... This Water Well Record was completed on (mo/day/year) 11/25/13.....
under the business name of Griffin Dewatering, North Central, LLC..... by (signature) Steve Dewick.....

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.