

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Pratt		Fraction $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number 23	Township No. T 27 S	Range Number R 15 E <input checked="" type="checkbox"/> W									
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"/> 2 West and 4 north of Collinson			Global Positioning System (GPS) information: Latitude: 37.40.563 n (in decimal degrees) Longitude: 98.56.331 W (in decimal degrees) Elevation: 2034' Datum: <input checked="" type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: Magellan Meridian) <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 checked="" type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m											
2 WATER WELL OWNER: Fred Newby RR#, Street Address, Box #: 30519 nw 100th ave City, State, ZIP Code : Pratt KS 67124														
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>SW</td> <td>SE</td> <td></td> </tr> <tr> <td colspan="3">S</td> </tr> </table> S -----1 mile-----		NW	NE	E	SW	SE		S			4 DEPTH OF COMPLETED WELL 132 ft. Depth(s) Groundwater Encountered (1) 67 ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 67 ft. below land surface measured on mo/day/yr..... 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 14 3/4 in. to 147 ft., and..... in. to..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input 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 checked="" 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 checked="" 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..... CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter 8 in. to 92 ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft. Casing height above land surface 24 in., Weight..... lbs./ft., Wall thickness or gauge No. sdr 17 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 92 ft. to 132 ft., From..... ft. to..... ft. From..... ft. to..... ft., From..... ft. to..... ft. GRAVEL PACK INTERVALS: From 132 ft. to 30 ft., From..... ft. to..... ft. From..... ft. to..... ft., From..... ft. to..... ft.														
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other..... Grout Intervals: From 30 ft. to 0 ft., From..... ft. to..... ft., From..... ft. to..... ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input checked="" 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 North Distance from well 1500'														
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS									
0	4	silty sand												
4	28	silty clay												
28	68	silty sands \ small gravel												
68	115	small to med gravel												
115	125	med gravel												
125	132	tan shale												
Original Returned to Sender for Correction Date: 1/20/11														
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) 12/27/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 12/30/10 under the business name of Pratt Well Service Inc. by (signature) <i>[Signature]</i>														
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 785-296-5522. 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 .														