

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number		Range Number
County	Grant	SE ¼	SW ¼	NE ¼	27	T 27 S 38	E/W
Distance and direction from nearest town or city street address of well if located within city? 6 North and 6 West of Ulysses				Global Positioning System (decimal degrees, min. of 4 digits)			
2 WATER WELL OWNER: David Walker RR#, St. Address, Box # : 209 E. Beatty City, State, ZIP Code : Johnson, KS 67855				Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____			
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>420</u> ft.					
		Depth(s) Groundwater Encountered 1 <u>240</u> 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					
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well					
		1 <u>Domestic</u> 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 _____; If yes, mo/day/yr Sample was submitted _____					
		Water Well Disinfected? Yes <u>x</u> No _____					
5 TYPE OF CASING USED:		5 Wrought Iron		8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____	
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below) _____	
2 <u>PVC</u>		4 ABS		7 Fiberglass		Welded _____	
						Threaded _____	
Blank casing diameter <u>5</u> in. to <u>420</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Casing height above land surface <u>18</u> in., Weight <u>SDR 17</u> lbs./ft. Wall thickness or gauge No. _____							
TYPE OF SCREEN OR PERFORATION MATERIAL:		1 Steel		3 Stainless steel		5 Fiberglass	
		2 Brass		4 Galvanized steel		6 Concrete tile	
		7 <u>PVC</u>		9 ABS		11 Other (specify) _____	
		8 <u>RM (SR)</u>		10 Asbestos-Cement		12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:		1 Continuous slot		3 <u>Mill slot</u>		5 Guaze wrapped	
		2 Louvered shutter		4 Key punched		6 Wire wrapped	
				7 Torch cut		9 Drilled holes	
				8 Saw Cut		11 None (open hole)	
SCREEN-PERFORATED INTERVALS:		From <u>320</u> ft. to <u>340</u> ft.		From <u>360</u> ft. to <u>380</u> ft.			
		From <u>400</u> ft. to <u>420</u> ft.		From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS:		From <u>25</u> ft. to <u>420</u> ft.		From _____ ft. to _____ ft.			
		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.			
6 GROUT MATERIAL:		1 Neat cement		2 Cement grout		3 Bentonite	
		4 Other _____					
Grout Intervals From <u>5</u> ft. to <u>25</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	
		2 Sewer lines		5 Cess pool		8 Sewage lagoon	
		3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens		13 Insecticide Storage	
				11 Fuel storage		14 Abandoned water well	
				12 Fertilizer storage		15 Oil well/ gas well	
Direction from well? <u>NA</u>						How many feet? _____	
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS	
0	100	Topsoil and Brown Clay					
100	120	Brown Sandy Clay					
120	160	Sandy Clay and Little Fine Sand					
160	220	Gray Clay					
220	280	Sand Fine to Medium Little Cliché					
280	350	Brown Clay and Cliché little Iron Pyrite					
350	410	Cemented Sand Little Cliché					
410	420	Yellow and Gray 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) <u>1/13/10</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>1/14/10</u> under the business name of <u>Tyler Water Well Ince</u> by (signature) <u>[Signature]</u> .							
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.							