

**WATER WELL RECORD**

**Form WWC-5**

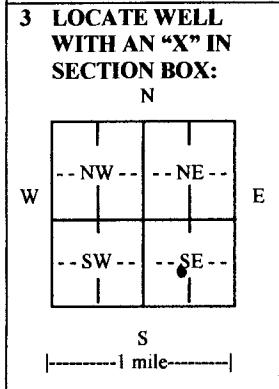
Division of Water Resources App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: Kingman	Fraction NE ¼ NE ¼ SW ¼ SE ¼	Section Number 5	Township No. T 27 S	Range Number R 6 <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 .  
From Hwy 14 & NE 50th Street - 3 1/4W NSR 1/4 in field

**Global Positioning System (GPS) information:**  
Latitude: .37.72268 (in decimal degrees)  
Longitude: 097.99567 (in decimal degrees)  
Elevation: 1498  
Datum:  WGS 84,  NAD 83,  NAD 27  
Collection Method:  
 GPS unit (Make/Model: Garmin 62S)  
 Digital Map/Photo,  Topographic Map,  Land Survey  
Est. Accuracy:  <3 m,  3-5 m,  5-15 m,  >15 m

**2 WATER WELL OWNER:** Pat Malony  
RR#, Street Address, Box #: 1740 North Spruce Street  
City, State, ZIP Code : Kingman, Kansas 67068-1050



**4 DEPTH OF COMPLETED WELL** 102 ft.  
Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.  
WELL'S STATIC WATER LEVEL 6 ft. below land surface measured on mo/day/yr. 1/7/14  
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 9 7/8 in. to 102 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) Stock  
 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 .5 in. to .32 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface .16 in., Weight .160 lbs./ft., Wall thickness or gauge No. 214  
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 .32 ft. to 102 ft., From ..... ft. to ..... ft.  
From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From 102 ft. to 15 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 15 ft. to 0 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 none  
Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	Top soil	96	102	Green & red shale w/pcs.of gypsum
3	5	Brown clay-sandy			brittle
5	9 1/2	Med.-fine sand			
9 1/2	27	Red shale w/pcs-green shale/brittle			
27	38	Green shale w/pcs-red shale/brittle			
38	55	Red shale-brittle			
55	72	Green shale w/pcs-red shale/brittle			
72	82	Red shale-brittle			
82	96	Red shale w/pcs-green shale-pcs of gypsum-brittle			

**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) 1/7/2014 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/year) 1/8/2014 under the business name of Rosencrantz-Bemis Ent. by (signature) [Signature]

**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>.