

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Gray</u>	Fraction <u>SE 1/4 SE 1/4 SW 1/4</u>	Section Number <u>6</u>	Township Number T <u>28</u> S	Range Number R <u>29</u> <u>EW</u>
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Distance and direction from nearest town or city street address of well if located within city? From Montezuma, 2 1/2 miles north on 12 rd., then 4 1/2 miles west.

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: Roy Koehn
 RR#, St. Address, Box # : 7802 Z Road
 City, State, ZIP Code : Montezuma, KS 67867

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

W			E
	-- NW --	-- NE --	
	-- SW --	-- SE --	
		X	
	S		

4 DEPTH OF COMPLETED WELL 505 ~~445~~ ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL..... 198 ft. below land surface measured on mo/day/yr... 8/8/06
 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
 Domestic 3 Feedlot 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 X.....; If yes, mo/day/yr
 Sample was submitted..... Water well disinfected? Yes X No

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	5 Wrought Iron	6 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped.....
<input checked="" type="radio"/> PVC	4 ABS	7 Fiberglass	9 Other (specify below)	Welded.....
				Threaded.....

Blank casing diameter in. to 4.45 ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface..... 12 in., Weight..... lbs./ft. Wall thickness or gauge No. SDR21

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<input checked="" type="radio"/> PVC	9 ABS	11 Other (Specify)
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Guazed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	<input checked="" type="radio"/> Saw Cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From..... 445 ft. to 505 ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From..... 24 ft. to 420 ft., From 430 ft. to 505 ft.
 From..... ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other

Grout Intervals: From 4 ft. to 24 ft., From 420 ft. to 430 ft., From ft. to ft.

What is the nearest source of possible contamination:

<input checked="" type="checkbox"/> 1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well	<u>House</u>

Direction from well? East How many feet? 150

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil	315	325	Med. Sand
2	50	Tan clay	325	350	Tan Sandy Clay
50	89	Sandy & Caliche	350	370	Fine Med. Sand
89	130	Brown Sandy	370	390	Course Sand
130	255	Course Sand	390	400	Brown Sandy
255	260	Tan clay	400	422	Course Sand
260	280	Course Sand	422	430	yellow clay
280	285	white clay	430	447	Blue clay
285	308	Med. Sand	447		Sandstone
308	315	white Clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8/8/06 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 533 This Water Well Record was completed on (mo/day/year) 1/10/07
 under the business name of Quanten Water Well by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, and 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.kdhe.state.ks.us/geo/waterwells>.