

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources; App. No. **10,409**

<b>1 LOCATION OF WATER WELL:</b>		Fraction <b>NE ¼ NE ¼ NW ¼</b>		Section Number <b>27</b>	Township Number <b>T 28 S</b>	Range Number <b>R 30 E</b>
County: <b>Gray</b>				Global Positioning System (decimal degrees, min. of 4 digits)		
Distance and direction from nearest town or city street address of well if located within city? From Pierceville, South approx. 16 miles, East approx. 3 miles, South approx. 4 miles, East approx. 2 & 4/10 mi., South approx. 700 ft., & Southwest approx. 950 ft.				Latitude: _____		
				Longitude: _____		
<b>2 WATER WELL OWNER: Ron Jantz</b>				Elevation: _____		
RR#, St. Address, Box # : 32305 2 Road				Datum: _____		
City, State, ZIP Code : Copeland, Ks, 67837				Data Collection Method: _____		
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>		<b>4 DEPTH OF COMPLETED WELL 200 ft.</b>				
<div style="text-align: center;"> </div>		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.				
		WELL'S STATIC WATER LEVEL <b>160</b> ft. below land surface measured on mo/day/yr <b>3/12/08</b>				
		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 Domestic 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 <b>x</b> ; If yes, mo/day/yr				
		Sample was submitted _____ Water Well Disinfected? Yes <b>x</b> No _____				
<b>5 TYPE OF CASING USED:</b>		5 Wrought Iron		8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____
① Steel		3 RMP (SR)		6 Asbestos-Cement		Welded _____
2 PVC		4 ABS		7 Fiberglass		Threaded _____
Blank casing diameter <b>16</b> in. to <b>200</b> ft., Dia _____						in. to _____ ft.
Casing height above land surface <b>12</b> in., Weight <b>42</b> lbs./ft.						Wall thickness or gauge No. <b>.250</b>
TYPE OF SCREEN OR PERFORATION MATERIAL:						
① Steel 3 Stainless steel 5 Fiberglass 7 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 Gauge wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)						
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____						
SCREEN-PERFORATED INTERVALS: From <b>180</b> ft. to <b>200</b> ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>200</b> ft. From _____ ft. to _____ ft.						
From _____ ft. to _____ ft.						
<b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout ③ Bentonite 4 Other _____						
Grout Intervals From <b>0</b> ft. to <b>20</b> ft. From _____ ft. to _____ ft.						
What is the nearest source of possible contamination:						
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						
Direction from well? _____ How many feet? _____						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	30	Topsoil & clay				
30	60	Clay				
60	95	Clay & lime				
95	105	Sand, clay, & lime				
105	113	Clay & lime				
113	142	Sand & clay				
142	154	Clay & lime				
154	174	Sand, clay, & cemented sand				
174	176	Cemented sand				
176	182	Clay & lime				
182	195	Sand & cemented sand				
195	201	Sand				
201	210	Clay & lime				
210	217	Sand & clay				
217	230	Clay & lime				

230	231	Lime			
231	232	Sand			
232	233	Lime			
233	245	Sand & clay			
245	246	Lime			
246	252	Clay & lime			

**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) 11/4/2008 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 145. This Water Well Record was completed on (mo/day/year) 11/12/08 under the business name of Henkle Drilling & Supply Co., Inc. by (signature) Bruce R. Henkle.

**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>.