

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

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|--|-----------------------------------|--|--|---------------------------|--|
| 1 LOCATION OF WATER WELL: County: Haskell | Fraction NW ¼ NW ¼ NW ¼ | Section Number 18 | Township Number T 28 S R 32 E/W | Range Number 32 | |
| Distance and direction from nearest town or city street address of well if located within city? 10 North of Sublette | | Global Positioning System (decimal degrees, min. of 4 digits) Latitude: N 37 deg 37' 12.4" Longitude: W 100 deg 52' 12.3 " Elevation: 2966 Datum: _____ Data Collection Method: _____ | | | |
| 2 WATER WELL OWNER: 4 BK Cattle Co. RR#, St. Address, Box # : HCR 1 Box 4 City, State, ZIP Code : Sublette KS 67877 | | | | | |

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| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 DEPTH OF COMPLETED WELL 590 ft. |
| | Depth(s) Groundwater Encountered 1 _____ 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 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 <u>x</u> ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes <u>x</u> No _____ | |

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| 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) _____ Welded _____ |
| 2 PVC | 4 ABS | 7 Fiberglass | Eagle-Loc _____ Threaded _____ |
| Blank casing diameter 5 in. to 590 ft., Dia _____ in. to _____ ft., Dia _____ 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: 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 Gauze 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 450 ft. to 470 ft. From 530 ft. to 550 ft. From 570 ft. to 590 ft. From _____ ft. to _____ ft. | | | |
| GRAVEL PACK INTERVALS: From 25 ft. to 590 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. | | | |

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|--|--|----------------|-------------|---------------|
| 6 GROUT MATERIAL: | 1 Neat cement | 2 Cement grout | 3 Bentonite | 4 Other _____ |
| Grout Intervals From 5 ft. to 25 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 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? None observed | | | |

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|-----|--|------|-----|---------------------------------|
| 0 | 4 | Topsoil | 538 | 560 | Sand, fine to med; some clay |
| 4 | 80 | Brown sandy clay & caliche streaks | 560 | 594 | Sand & gravel, loose; some clay |
| 80 | 222 | Sand & gravel, med to coarse | 594 | 620 | Blue clay, hard |
| 222 | 260 | Brown sandy clay | | | |
| 260 | 320 | Sand & gravel, med to coarse; a lit clay | | | |
| 320 | 360 | Sandy clay & sand mix | | | |
| 360 | 400 | Sand & gravel, med to coarse; clay strks | | | |
| 400 | 468 | Brown clay | | | |
| 468 | 475 | Sand, med to coarse | | | |
| 475 | 538 | Brown clay & a little caliche | | | |

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) **8/1/08** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **473**. This Water Well Record was completed on (mo/day/year) **8/1/08** under the business name of **Tyler Water Well, Inc.** by (signature)

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>.