

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

46956

1 LOCATION OF WATER WELL:

County: Pratt

Fraction

NW ¼ NW ¼ NE ¼

Section Number

36

Township Number

T 29 S

Range Number

R 13 ~~XX~~W

Distance and direction from nearest town or city street address of well if located within city?

½ South, ¼ West of Sawyer

2 WATER WELL OWNER: Vernon Hirt

RR#, St. Address, Box # : 12640 NW Turkey Ln Road

City, State, ZIP Code : Sawyer, Ks. 67134

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

Latitude: _____

Longitude: _____

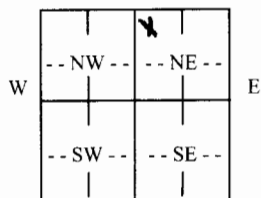
Elevation: _____

Datum: _____

Data Collection Method: _____

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

N



S

4 DEPTH OF COMPLETED WELL198..... ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL.....87..... ft. below land surface measured on mo/day/yr. 3-19-10..

Pump test data: Well water was.....124.....ft. after.....1..... hours pumping.....220..... gpm

Est. Yield..220..gpm: Well water was.....126.....ft. after.....1½..... hours pumping.....220..... gpm

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 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/yrSample was submitted..... Water well disinfected? Yes HTH..... No

5 TYPE OF CASING USED:

1 Steel

3 RMP (SR)

5 Wrought Iron

6 Asbestos-Cement

8 Concrete tile

9 Other (specify below)

CASING JOINTS: Glued...X... Clamped.....

2 PVC

4 ABS

7 Fiberglass

Welded.....

Threaded.....

Blank casing diameter8..... in. to118..... ft., Diameter.8..... in. to178..... ft., Diameter in. to ft.

Casing height above land surface.....24..... in., Weight ..SDR-26.....lbs./ft. Wall thickness or gauge No.

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 Gauzed 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.....198..... ft. to178..... ft., From ft. to ft.

From.....138..... ft. to118..... ft., From ft. to ft.

GRAVEL PACK INTERVALS: From.....198..... ft. to20..... 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

hole plug

Grout Intervals: From ft. to ft., From ft. to ft., From20..... ft. to0..... 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

2 Sewer lines

5 Cess pool

8 Sewage lagoon

11 Fuel storage

14 Abandoned water well

below)

3 Watertight sewer lines

6 Seepage pit

9 Feedyard

12 Fertilizer storage

15 Oil well/gas well

None.....

Direction from well?

How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
00	3	Top soil	143	188	Sandy tan clay with streaks
3	10	Tan clay			of small sand & gravel
10	19	White clay	188	198	Small sand & gravel
19	30	Sand & gravel- small			
30	52	Sandy tan clay			
52	105	Small sand & gravel & clay mixed			
		with streaks of clay			
105	120	Small sand & gravel			
120	130	Tan clay			
130	143	Small sand & gravel mixed w/tan clay			

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) ...3-19-10... 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) ...3-25-10.....

under the business name of Rosencrantz- Bemisby (signature) Tom Alb

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline 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/index.html>.