

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No. [REDACTED]

<b>1 LOCATION OF WATER WELL:</b> County: <u>Norton</u>		Fraction <u>1/4 SW 1/4 N 6 W 1/4</u>	Section Number <u>18</u>	Township Number <u>T 2 S</u>	Range Number <u>R 24 E (W)</u>									
Distance and direction from nearest town or city street address of well if located within city? <u>10 miles west, 3 miles North of Norton</u>			<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____											
<b>2 WATER WELL OWNER:</b> <u>Irene Friebus</u> RR#, St. Address, Box # : <u>565 W. Limestone Rd</u> City, State, ZIP Code : <u>Phillipsburg, Mo 67661</u>		<b>4 DEPTH OF COMPLETED WELL</b> ..... <u>140</u> ft.												
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N W <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td></tr><tr><td>--NW--</td><td>X</td><td>--NE--</td></tr><tr><td> </td><td> </td><td> </td></tr></table> E S					--NW--	X	--NE--				Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL... <u>1.2.2</u> ft. below land surface measured on mo/day/yr. <u>1.1.18-1.2</u> Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield. <u>10</u> 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 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 <input checked="" type="checkbox"/> ; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No .....			
--NW--	X	--NE--												
<b>5 TYPE OF CASING USED:</b> 1 Steel    3 RMP (SR)    6 Asbestos-Cement    9 Other (specify below) <u>2 PVC</u> 4 ABS    7 Fiberglass		CASING JOINTS: Glued <input checked="" type="checkbox"/> ..... Clamped..... Welded..... Threaded..... Blank casing diameter ..... <u>5</u> in. to <u>140</u> ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface... <u>3.6</u> in., weight.....lbs./ft. Wall thickness or gauge No. <u>2.00 p.s.</u> TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel    3 Stainless Steel    5 Fiberglass <u>7 PVC</u> 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 <u>3 Mill slot</u> 5. Guazed 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 <u>120</u> ft. to <u>140</u> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From <u>25</u> ft. to <u>140</u> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.												
<b>6 GROUT MATERIAL:</b> 1 Neat cement    2 Cement grout <u>3 Bentonite</u> 4 Other .....		Grout Intervals: From <u>0</u> ft. to <u>25</u> 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 <u>plus 14</u> Abandoned water well 3 Watertight sewer lines    6 Seepage pit    9 Feedyard    12 Fertilizer Storage    15 Oil well/gas well Direction from well? <u>North</u> How many feet? <u>65'</u>												
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS									
0	4	Black dirt												
4	35	gray clay												
35	60	gray-brown clay												
60	90	gray clay, soft sandstone												
90	110	soft sandstone, fine sand												
110	120	fine sand, white clay												
120	140	white clay, coarse sand												
140		Orch												

**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) 1.1.18-1.2 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 756 This Water Well Recored was completed on (mo/day/year) 1.2-10-12 Under the business name of Gallenstone Well Service by (signature) Doug Gallenstone

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-