

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:
 County: Kiowa Fraction NE 1/4 NE 1/4 NE 1/4 Section Number 15 Township Number T 30 S Range Number R 18 E/W
 Distance and direction from nearest town or city street address of well if located within city? South of Greensburg, KS **Global Positioning Systems** (decimal degrees, min. of 4 digits)
 Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____

2 WATER WELL OWNER: Nate Kuhns
 RR#, St. Address, Box # : 6000 31st AVE
 City, State, ZIP Code : Greensburg KS 67054

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

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

4 DEPTH OF COMPLETED WELL 166 ft.
 Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL... 67 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
 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) 6 Asbestos-Cement 9 Other (specify below) CASING JOINTS: Glued...X... Clamped.....
 PVC 4 ABS 7 Fiberglass Welded.....
 Blank casing diameter 5 in. to ft., Diameter. in. to ft., Diameter in. to ft.
 Casing height above land surface..... 24 in., Weight..... 160 lbs./ft. Wall thickness or gauge No.
TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass 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:
 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 8 Saw Cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: From..... 166 ft. to 146 ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From..... 166 ft. to 21 ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other
 Grout Intervals: From 21 ft. to 0 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? Nothing close

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Brown clay			
10	15	White clay			
15	30	Red clay			
30	65	Tan clay			
65	80	Small gravel			
80	110	Tan clay			
110	166	Fine Sand - Tan			

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) 10-1-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 672. This Water Well Record was completed on (mo/day/year) 10-8-09 under the business name of Crowd's water well by (signature) [Signature]

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.kdhe.state.ks.us/geo/waterwells>.