

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: Haskell		NE ¼ NE ¼ NW ¼		4		T 30 S		R 32 E/W			
Distance and direction from nearest town or city street address of well if located within city? .25 East of Sublett				Global Positioning System (decimal degrees, min. of 4 digits)							
2 WATER WELL OWNER: James Morris RR#, St. Address, Box # : 1541 Road 190 City, State, ZIP Code : Sublette KS 67877				Latitude: _____							
				Longitude: _____							
				Elevation: _____							
				Datum: _____							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>				4 DEPTH OF COMPLETED WELL 400 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 <input checked="" type="checkbox"/> ; If yes, mo/day/yr _____ Sample was submitted _____ Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____							
5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) _____ 2 PVC 4 ABS 7 Fiberglass _____ Eagle-Loc _____ Blank casing diameter 5 in. to 400 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 21				CASING JOINTS: Glued _____ Clamped _____ Welded _____ Threaded _____							
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 300 ft. to 320 ft. From 340 ft. to 360 ft. From 380 ft. to 400 ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 20 ft. to 400 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 _____ Grout Intervals From 0 ft. to 20 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		5		Topsoil							
5		40		Brown sandy clay							
40		60		Caliche & clay							
60		100		Fine sand & a little clay							
100		160		Sand, med to coarse							
160		280		Brown sandy clay & sandstreaks							
280		337		Cemented sand & clay streaks							
337		346		Clay							
346		400		Cemented sand & clay streaks							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>4/24/07</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>473</u> . This Water Well Record was completed on (mo/day/year) <u>6/5/07</u> under the business name of <u>Tyler Water Well, Inc.</u> by (signature) <u>[Signature]</u>											
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 .											