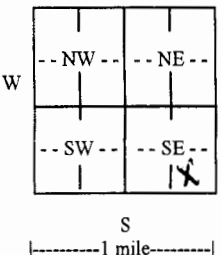


**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: HASKEL	Fraction ¼ NE ¼ NE ¼ NE ¼	Section Number 23	Township No. T 30 S	Range Number R 33 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> Sublete: hwy 56 & hwy 83 jct s on hwy 83 to rd 220 w on rd 220 app 1.1 miles s into loc		<b>Global Positioning System (GPS) information:</b> Latitude: ..... (in decimal degrees) Longitude: ..... (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: .....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
<b>2 WATER WELL OWNER:</b> BILL KING RR#, Street Address, Box #: 1102 MONKINGBIRD LANE City, State, ZIP Code : GARDEN CITY, KS 67846				

<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> N  S  -----1 mile-----	<b>4 DEPTH OF COMPLETED WELL</b> 480 ..... ft. Depth(s) Groundwater Encountered (1) 278 ..... ft. (2) ..... ft. (3) ..... ft. WELL'S STATIC WATER LEVEL 278 ..... ft. below land surface measured on mo/day/yr. 08-07-12 ..... Pump test data: Well water was 373 ..... ft. after 1 ..... hours pumping 100 ..... gpm EST. YIELD 100 ..... gpm. Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter 10 3/4 ..... in. to 480 ..... ft., and ..... in. to ..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input checked="" type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well ..... Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted ..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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**5 TYPE OF CASING USED:**  Steel  PVC  Other .....  
**CASING JOINTS:**  Glued  Clamped  Welded  Threaded  
 Casing diameter .6" ..... in. to 480 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface 24 ..... in., Weight 4.074 ..... lbs./ft., Wall thickness or gauge No. SDR 21-316  
**TYPE OF SCREEN OR PERFORATION MATERIAL:**  
 Steel  Stainless Steel  PVC  Other (Specify) .....  
 Brass  Galvanized Steel  None used (open hole)  
**SCREEN OR PERFORATION OPENINGS ARE:**  
 Continuous slot  Mill slot  Gauze wrapped  Torch cut  Drilled holes  None (open hole)  
 Louvered shutter  Key punched  Wire wrapped  Saw cut  Other (specify) .....  
**SCREEN-PERFORATED INTERVALS:** From 380 ..... ft. to 480 ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From 210 ..... ft. to 480 ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**6 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....  
 Grout Intervals: From 1 ..... ft. to 25 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 What is the nearest source of possible contamination:  
 Septic tank  Lateral lines  Pit privy  Livestock pens  Insecticide storage  Other (specify below)  
 Sewer lines  Cesspool  Sewage lagoon  Fuel storage  Abandoned water well  
 Watertight sewer lines  Seepage pit  Feedyard  Fertilizer storage  Oil well/gas well .....  
 Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	5	TOP SOIL	421	456	SAND/SANDY CLAY
5	43	TAN CLAY/CALICHE	456	463	BLUE CLAY
43	76	CLAY/SANDY CLAY	463	472	SAND
76	100	SAND/CLAY	472	490	BLUE CLAY
100	141	COARSE SAND			
141	210	SAND/CLAY			
210	283	MEDIUM SAND/SAND STONE			
283	310	SAND/SANDY CLAY			
310	330	BLUE SAND CLAY			
330	421	MEDIUM SAND			

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo/day/year) 08-07-12 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 430 ..... This Water Well Record was completed on (mo/day/year) 08-07-12 ..... under the business name of Howard Drilling Co Box 806 Bvr Ok 73932 ..... by (signature) .....

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.