

WATER WELL RECORD

Form WWC-5

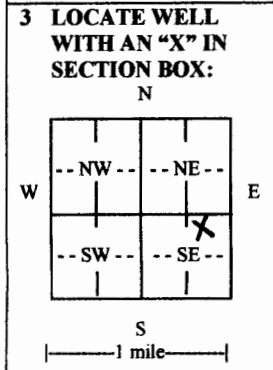
Division of Water Resources App. No.

<b>1 LOCATION OF WATER WELL:</b> County: Barber	Fraction SE ¼ NW ¼ NE ¼ SE ¼	Section Number 24	Township No. T 31 S	Range Number R 12 <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 .  
4.5 miles North on 381 Hwy from Medicine Lodge, East 1/2 mile on Albee Rd.

**Global Positioning System (GPS) information:**  
Latitude: .37.332347 (in decimal degrees)  
Longitude: .-98.570721 (in decimal degrees)  
Elevation: 1538  
Datum:  WGS 84,  NAD 83,  NAD 27  
Collection Method:  
 GPS unit (Make/Model: .....)  
 Digital Map/Photo,  Topographic Map,  Land Survey  
Est. Accuracy:  <3 m,  3-5 m,  5-15 m,  >15 m

**2 WATER WELL OWNER:** City of Medicine Lodge  
RR#, Street Address, Box #: 114 W. First Ave.  
City, State, ZIP Code : Medicine Lodge. Ks 67104



**4 DEPTH OF COMPLETED WELL** 51 ft. #17

Depth(s) Groundwater Encountered (1) 8 ft. (2) ..... ft. (3) ..... ft.  
WELL'S STATIC WATER LEVEL 8 ft. below land surface measured on mo/day/yr. 4/3/2017  
Pump test data: Well water was 14 ft. after 24 hours pumping 350 gpm  
EST. YIELD 400 gpm. Well water was ..... ft. after ..... hours pumping ..... gpm  
Bore Hole Diameter 28 in. to 51 in. ft., and ..... in. to ..... ft.  
WELL WATER TO BE USED AS:  Public water supply  Geothermal  Injection well  
 Domestic  Feedlot  Oil field water supply  Dewatering  Other (Specify below)  
 Irrigation  Industrial  Domestic-lawn & garden  Monitoring well  
Was a chemical/bacteriological sample submitted to Department?  Yes  No  
If yes, mo/day/yr sample was submitted.....  
Water well disinfected?  Yes  No

**5 TYPE OF CASING USED:**  Steel  PVC  Other .....

CASING JOINTS:  Glued  Clamped  Welded  Threaded  
Casing diameter 12 in. to 38 ft., Diameter 12 in. to 46-51 ft., Diameter ..... in. to ..... ft.  
Casing height above land surface 16 in., Weight ..... lbs./ft., Wall thickness or gauge No. 50

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 38 ft. to 46 ft., From ..... ft. to ..... ft.  
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 32 ft. to 51 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 0 ft. to 20 C ft., From 20 ft. to 32 B 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 None within 1/4 mile

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Topsoil			
2	6	Clay, sandy			
6	20	Sand, fine			
20	47	Sand, medium- coarse			
47	51	Clay, brown			

**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) 4/3/2017 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138. This Water Well Record was completed on (mo/day/year) 4/17/2017 under the business name of Peterson Irrigation, Inc. by (signature) Mike Peterson

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy 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