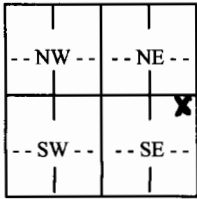


**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: <u>Seward</u>	Fraction <u>NE 1/4 NE 1/4 SE 1/4</u>	Section Number <u>21</u>	Township Number <u>T 32 S</u>	Range Number <u>R 34 E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Liberal: North on Hwy83 to Satanta cut off 1.5 N to Rd. 12, 5 W of curve 2.5N and W into</u>		<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____		
<b>2 WATER WELL OWNER:</b> RR#, St. Address, Box # : <u>SW Windmill P.O. 909</u> City, State, ZIP Code : <u>Meade, KS 67864</u>		Elevation: _____ Datum: _____ Data Collection Method: _____		

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N  W E S	<b>4 DEPTH OF COMPLETED WELL</b> ..... <u>430</u> ..... ft.  Depth(s) Groundwater Encountered (1)..... <u>260</u> ..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... <u>260</u> ..... ft. below land surface measured on mo/day/yr. <u>8-7-08</u> 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 <input checked="" type="radio"/> 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 .....
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<b>5 TYPE OF CASING USED:</b> <input checked="" type="radio"/> 1 Steel <input checked="" type="radio"/> 2 PVC 3 RMP (SR) 4 ABS	5 Wrought Iron 6 Asbestos-Cement 7 Fiberglass	8 Concrete tile 9 Other (specify below)	CASING JOINTS: <input checked="" type="checkbox"/> Glued... <input checked="" type="checkbox"/> Clamped..... <input type="checkbox"/> Welded..... <input type="checkbox"/> Threaded.....
Blank casing diameter ..... <u>5</u> ..... in. to <u>340</u> ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface..... <u>24</u> ..... in., Weight <u>3.706</u> .....lbs./ft. Wall thickness or gauge No. <u>SDR 21, 316</u> .....			
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="radio"/> 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)			
<b>SCREEN OR PERFORATION OPENINGS ARE:</b> 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped <input checked="" type="radio"/> 8 Saw cut 10 Other (specify) .....			
<b>SCREEN-PERFORATED INTERVALS:</b> From..... <u>340</u> ..... ft. to ..... <u>420</u> ..... ft., From ..... ft. to ..... ft. From..... ft. to ..... ft., From ..... ft. to ..... ft.			
<b>GRAVEL PACK INTERVALS:</b> From..... <u>220</u> ..... ft. to ..... <u>420</u> ..... ft., From ..... ft. to ..... ft. From..... ft. to ..... ft., From ..... ft. to ..... ft.			

<b>6 GROUT MATERIAL:</b> <input checked="" type="radio"/> 1 Neat cement 2 Cement grout 3 Bentonite <input checked="" type="radio"/> 4 Other ..... <u>hole plug</u>	Grout Intervals: From ..... <u>1</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 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? .....	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Surface	301	304	Sandy clay
2	54	Clay	304	314	Caliche rock
54	75	Sandy clay	314	420	Sand
75	90	Clay	420	430	Sand and clay streaks
90	104	Sand			
104	122	Clay and sandy clay			
122	240	Sand			
240	250	Sand and Sandy clay			
250	257	Sandy clay			
257	301	Sand			

**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) 8-7-08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. KWWCL430. This Water Well Record was completed on (mo/day/year) 8-7-08 under the business name of Howard Drilling Box 806 Beaver, Okla 71930 (Signature: Howard Drilling)

**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.kdheks.gov/waterwell/index.html>.