

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Seward	Fraction SE ¼ SE ¼ SW ¼	Section Number 29	Township Number T 33S S	Range Number R 33 E/W
Distance and direction from nearest town or city street address of well if located within city? Liberal: 5 N, ½ W and N into--		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		

2 WATER WELL OWNER: **Scott Whitaker**
RR#, St. Address, Box # : **P.O. Box 1986**
City, State, ZIP Code : **Liberal, KS 67901**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S	4 DEPTH OF COMPLETED WELL 360 ft. Depth(s) Groundwater Encountered (1)..... 214 ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 214 ft. below land surface measured on mo/day/yr. 05-10-06 Pump test data: Well water was... 264ft. after..... 1 hours pumping..... 70 gpm Est. Yield... 70 ...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 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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5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped.....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....
2 PVC 4 ABS 7 Fiberglass Threaded.....
Blank casing diameter **5** in. to **320** ft., Diameter in. to ft., Diameter in. to ft.
Casing height above land surface..... **24** in., Weight..... **3.604** lbs./ft. Wall thickness or gauge No. **SDR 21 .316**
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 Gauzed 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..... **320** ft. to **360** ft., From ft. to ft.
From..... **200** ft. to **360** ft., From ft. to ft.
GRAVEL PACK INTERVALS: From..... ft. to 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 **Hole Plug**
Grout Intervals: From **4** ft. to **25** 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

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Sandy Clay	186	203	Sandy Clay
2	10	Sandy Clay/Clay	203	220	Sand
10	25	Clay/Sandy Clay	220	240	Sandy Clay
25	40	Sand/ Sandy Clay	240	250	Sand
40	65	Sand	250	255	Clay
65	80	Sandy Clay/Caliche Clay	255	280	Blue Clay
80	135	Clay	280	300	Sandy Clay
135	141	Clay/ Sandy Clay	300	350	Sand
141	160	Sand/w/Clay streaks	350	360	Clay
160	186	Sandy Clay/Sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **1** constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **05-10-06** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **KWWCL-430** This Water Well Record was completed on (mo/day/year) **05-10-06** under the business name of **Howard Drilling Co. Box 806 Beaver** (Signature) *Howard Drilling Co.*

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 www.kansas.gov