

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: Stevens		NE ¼ SW ¼ NW ¼		4	T 33 S	R 36 E/W
Distance and direction from nearest town or city street address of well if located within city? 5 Miles East 2 ¾ North of Hugoton				Global Positioning System (decimal degrees, min. of 4 digits)		
2 WATER WELL OWNER: Walter Beesley RR#, St. Address, Box # : Box 818 City, State, ZIP Code : Hugoton, KS 67951				Latitude: _____		
				Longitude: _____		
				Elevation: _____		
				Datum: _____		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:				4 DEPTH OF COMPLETED WELL 390 ft.		
<div style="text-align: center;"> </div>				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 x ; If yes, mo/day/yr				Sample was submitted _____ Water Well Disinfected? Yes x No _____		
5 TYPE OF CASING USED:						
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below)		5 Wrought Iron 8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____		
2 PVC 4 ABS 7 Fiberglass				Welded _____		
				Eagle Loc _____ Threaded _____		
Blank casing diameter _____ 5 in. to _____ 390 ft., Dia		_____ in. to _____ ft., Dia		_____ in. to _____ ft.		
Casing height above land surface _____ 24 in., Weight _____		SDR 17		lbs./ft. Wall thickness or gauge No. _____		
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 Guaze 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 _____ 310 ft. to _____ 350 ft. From _____ 370 ft. to _____ 390 ft.						
GRAVEL PACK INTERVALS: From _____ 25 ft. to _____ 390 ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____						
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						
Direction from well? North				How many feet? 150		
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	20	Topsoil and Brown Clay	260	340	Brown Clay and Sand Streaks	
20	40	Brown Sandy clay	340	390	Gray Clay with Little Sand	
40	57	Fine Sand				
57	60	Brown Sandy clay				
60	95	Fine Sand Little Sandy Clay				
95	117	Sandy Clay and Cliché				
117	140	Cliché and Clay				
140	160	Gray Clay Little Cliché				
160	180	Sandy Clay and Sand				
180	260	Sand and Little Clay				
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) 3/12/10 and this record is true to the best of my knowledge and belief.						
Kansas Water Well Contractor's License No. 473 . This Water Well Record was completed on (mo/day/year) 3/15/10						
under the business name of Tyler Water Well Inc by (signature) _____						
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 .						