

CORRECTED COPY

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

LOCATION OF WATER WELL:		Fraction NW ¼ SE ¼ SE ¼	Section Number 5	Township Number T 33 S	Range Number R 37 E/W																																																																		
County: Stevens																																																																							
Distance and direction from nearest town or city street address of well if located within city? Intersection of Rd Q & Rd 12																																																																							
2 WATER WELL OWNER: HANSEN-MUELLER			Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																																																																				
RR#, St. Address, Box # : 1340 Rd 70 th City, State, ZIP Code : Sublett, KS 67877																																																																							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 520 ft.																																																																					
<div style="text-align: center;">N NW — NE W — SW — SE — E S</div> <div style="text-align: center;">X</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 _____; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____																																																																							
5 TYPE OF CASING USED:																																																																							
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Eagle Loc Threaded _____																																																																							
Blank casing diameter 5 in. to 520 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 400 ft. to 420 ft. From 440 ft. to 460 ft.																																																																							
From 480 ft. to 500 ft. From _____ ft. to _____ ft.																																																																							
GRAVEL PACK INTERVALS: From 27 ft. to 510 ft. From _____ ft. to _____ ft.																																																																							
From _____ ft. to _____ ft.																																																																							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____																																																																							
Grout Intervals From 5 ft. to 27 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? NA How many feet? _____																																																																							
<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th><th>FROM</th><th>TO</th><th>PLUGGING INTERVALS</th></tr></thead><tbody><tr><td>0</td><td>8</td><td>Topsoil and Sandy Clay</td><td>120</td><td>169</td><td>Sandy clay</td></tr><tr><td>8</td><td>30</td><td>Brown Clay and Sandy clay</td><td>169</td><td>180</td><td>Sand and Cliché</td></tr><tr><td>30</td><td>52</td><td>Fine Sand Little Clay</td><td>180</td><td>188</td><td>Brown Clay and Cliché</td></tr><tr><td>52</td><td>60</td><td>Red Sandy Clay</td><td>188</td><td>415</td><td>Sand with Red Clay Streaks</td></tr><tr><td>60</td><td>70</td><td>Fine Sand</td><td>415</td><td>420</td><td>Red Clay</td></tr><tr><td>70</td><td>80</td><td>Sandy Clay</td><td>420</td><td>520</td><td>Sand and Little Clay</td></tr><tr><td>80</td><td>85</td><td>Sand and Gravel</td><td></td><td></td><td></td></tr><tr><td>85</td><td>92</td><td>Sandy Clay and Clay</td><td></td><td></td><td></td></tr><tr><td>92</td><td>100</td><td>Cemented Sand</td><td></td><td></td><td></td></tr><tr><td>100</td><td>120</td><td>Fine Sand Little Cliché & Clay</td><td></td><td></td><td></td></tr></tbody></table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	8	Topsoil and Sandy Clay	120	169	Sandy clay	8	30	Brown Clay and Sandy clay	169	180	Sand and Cliché	30	52	Fine Sand Little Clay	180	188	Brown Clay and Cliché	52	60	Red Sandy Clay	188	415	Sand with Red Clay Streaks	60	70	Fine Sand	415	420	Red Clay	70	80	Sandy Clay	420	520	Sand and Little Clay	80	85	Sand and Gravel				85	92	Sandy Clay and Clay				92	100	Cemented Sand				100	120	Fine Sand Little Cliché & Clay			
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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) 6/4/10 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) 6/10/10 under the business name of Tyler Water Well 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 .																																																																							

CORRECTED

Driller Copy
White

KSA 82a-1212

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