

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Seward</u>	Fraction <u>SW 1/4 SW 1/4 SW 1/4</u>	Section Number <u>26</u>	Township Number T <u>34 S</u>	Range Number R <u>34</u> E <u>(W)</u>
---	--------------------------------------	-----------------------------	----------------------------------	--

Distance and direction from nearest town or city street address of well if located within city? Liberal: at Jct. Hwy 54/83 bypass 3N on Hwy 83 to Tucker Rd 4 W .9 S Co. Rd. EE

Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: N 37.03245
 Longitude: W 100.59316
 Elevation: 2955
 Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: Dr. Doherty
 RR#, St. Address, Box # : Rt. 1 Box 186
 City, State, ZIP Code : Liberal, Ks 67901

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
W	-- NW --	-- NE --	E
	-- SW --	-- SE --	
S			

4 DEPTH OF COMPLETED WELL 500 ft.

Depth(s) Groundwater Encountered (1).....156..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL.....156..... ft. below land surface measured on mo/day/yr. 5-23-07
 Pump test data: Well water was.....191..... ft. after.....1..... hours pumping.....100..... gpm
 Est. Yield. 100..... 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 .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)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued <u>.X</u> Clamped.....
2 <u>(V)</u> PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded.....
		7 Fiberglass		Threaded.....

Blank casing diameter 5..... in. to 460..... ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface.....24..... in., Weight...3.706..... lbs./ft. Wall thickness or gauge No. SDR 21.316

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<u>(7)</u> 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	<u>(7)</u> Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	<u>(8)</u> Saw Cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From.....460..... ft. to500..... ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From.....300..... ft. to500..... 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: From1..... ft. to25..... 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	6	Sandy clay			
6	32	Clay			
32	124	Sandy clay			
124	144	Clay			
144	177	Sandy clay and clay streaks			
177	211	Sand and clay streaks			
211	287	Sand			
287	318	Limestone			
318	500	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) ..5-23-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. KWCL 430 This Water Well Record was completed on (mo/day/year) ..5-23-07 under the business name of Howard Drilling Box 806 Beaver, Ok by 1992 (signature) Phil Doherty

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.kdhe.state.ks.us/geo/waterwells>.