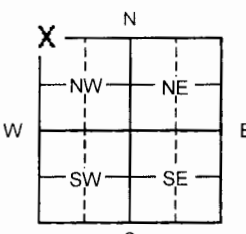


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. **45048**

1 LOCATION OF WATER WELL: County: Seward		Fraction NW ¼ NW ¼ NW ¼		Section Number 26	Township Number T 34 S	Range Number R 34 E/W
Distance and direction from nearest town or city street address of well if located within city? 3 west of liberal				Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Charlotte S. Hatcher RR#, St. Address, Box # : 651 Lilac Drive City, State, ZIP Code : Liberal Ks 67901						
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL 665 ft. 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 <u>Irrigation</u> 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well _____ Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>x</u> ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes <u>x</u> No _____				
5 TYPE OF CASING USED: 1 <u>Steel</u> 3 RMP (SR) 6 Asbestos-Cement 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded _____ <u>x</u> Threaded _____ Blank casing diameter 16 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 48 in., Weight _____ lbs./ft. Wall thickness or gauge No. .250 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 <u>Steel</u> 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 <u>Louvered shutter</u> 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 405 ft. to 485 ft. From 505 ft. to 525 ft. From 545 ft. to 565 ft. From 585-605 ft. to 645-665 ft. GRAVEL PACK INTERVALS: From 20 ft. to 665 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____ Grout Intervals From 0 ft. to 20 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 None observed Direction from well? _____ How many feet? _____						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	5	Topsoil	560	614	Fine to med sand & a little clay	
5	49	Sandy clay & fine sand	614	627	Brown sandy clay	
49	82	White clay & caliche	627	635	Fine to med sand	
82	164	Brown sndy clay & fine sand strks	635	663	Sand & a little clay	
164	180	Caliche & clay	663	665	Rock	
180	275	Fine to med sand; clay strks	665	680	Redbed	
275	305	Caliche & some clay				
305	335	Fine to med sand				
335	350	Brown sandy clay				
350	560	Med to fine sand & clay strks				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9/24/09 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) 9/25/09 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 .						