

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: Fraction <u>SE ¼ NW ¼ SE ¼</u>		Section Number <u>23</u>	Township Number <u>T 34 S</u>	Range Number <u>R 35 E/W</u>									
County: <u>Stewart Stevens</u>		Distance and direction from nearest town or city street address of well if located within city? <u>9.2 mi west and .5 north of Liberal on Tucker Rd.</u>											
2 WATER WELL OWNER: Charlotte Hatcher RR#, St. Address, Box # : <u>7 East 11th Street</u> City, State, ZIP Code : <u>Liberal Kansas 67901</u>		Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>37 deg 4' 22.3" North</u> Longitude: <u>101 deg 5' 22.9" West</u> Elevation: <u>2980</u> Data Collection Method: _____											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>700</u> ft.											
N <table border="1" style="margin: auto; text-align: center;"> <tr><td> </td><td> </td><td> </td></tr> <tr><td>NW</td><td> </td><td>NE</td></tr> <tr><td>SW</td><td>X</td><td>SE</td></tr> </table> S					NW		NE	SW	X	SE	Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> 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		
NW		NE											
SW	X	SE											
Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No _____; 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 2 PVC 4 ABS 7 Fiberglass		CASING JOINTS: Glued _____ Clamped _____ Welded <u>X</u> Threaded _____											
Blank casing diameter <u>16</u> in. to <u>700</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.													
Casing height above land surface <u>24</u> in., Weight _____ lbs./ft. Wall thickness or gauge No. <u>.250 & .219</u>													
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 Gauze 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 <u>440</u> ft. to <u>480</u> ft. From <u>520</u> ft. to <u>560</u> ft. From <u>600</u> ft. to <u>640</u> ft. From <u>660</u> ft. to <u>700</u> ft.													
GRAVEL PACK INTERVALS:													
From <u>20</u> ft. to <u>700</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.													
6 GROUT MATERIAL:													
1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other _____ Grout Intervals From <u>0</u> ft. to <u>20</u> 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? <u>None observed</u>													
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS								
0	49	Fine sand & a little clay	575	641	Fine sand & some clay								
49	72	Brown clay	641	660	Yellow & gray clay								
72	90	Fine sand	660	700	Fine sand; a little clay								
90	197	Clay & caliche											
197	290	Sandy clay & sand streaks											
290	445	Sand, fine to med; a little clay											
445	470	Sand, med											
470	515	White, brown, & orange sandy clay											
515	554	Fine to med sand with white rock strks											
554	575	Sandy clay & sandstone streaks											
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) <u>6/12/08</u> and this record is true to the best of my knowledge and belief.													
Kansas Water Well Contractor's License No. <u>473</u> . This Water Well Record was completed on (mo/day/year) <u>6/24/08</u>													
under the business name of <u>Tyler Water Well, Inc.</u> by (signature) <u>[Signature]</u>													
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 .													

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