

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL:		Fraction County: Stevens NW ¼ NW ¼ NE ¼		Section Number 19	Township Number T 34 S	Range Number R 38 E/W
Distance and direction from nearest town or city street address of well if located within city? 5 Miles South of Feterida				Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Walter Beesley RR#, St. Address, Box # : Box 818 City, State, ZIP Code : Hugoton, KS 67951						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 480 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 <u>Domestic</u> 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 <u>x</u> ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes <u>x</u> No _____				
		5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____ <u>2 PVC</u> 4 ABS 7 Fiberglass Eagle Loc Threaded _____ Blank casing diameter 5 in. to 480 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 <u>7 PVC</u> 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 <u>3 Mill slot</u> 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 440 ft. From 460 ft. to 480 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 24 ft. to 480 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.				
6 GROUT MATERIAL:		1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other _____ Grout Intervals From 3 ft. to 24 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? NA				
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS
0	10	Topsoil and Sandy Clay		320	360	Fine Sand Little Sandy Clay
10	17	Cemented Sand		360	380	Sandy Clay Little Fine Sand
17	100	Brown Sandy Clay Little Cliché & Sand		380	460	Sand Medium Little Clay and Cliché
100	120	Brown & White Sandy Clay Lt Sand		460	465	Sand and Sandy Yellow Clay
120	140	Sand and Gravel		465	470	Cliché
140	167	Red Sandy Clay Little Cliché		470	480	Blue Clay
167	190	Fine Sand Little Clay				
190	220	Sandy Clay Little Sand				
220	240	Brown Clay				
240	320	Sandy Clay with Few Sand Streaks				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3/10/10 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 .						

White Copy

KSA 82a-1212

Form provided by Forms-On-A-Disk, Inc. • Dallas, Texas • (214) 340-9429