

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number															
County: Morton		NE ¼ SW ¼ SW ¼		12	T 34 S	R 40 E/W															
Distance and direction from nearest town or city street address of well if located within city? 1 Mile south of Rolla				Global Positioning System (decimal degrees, min. of 4 digits)																	
2 WATER WELL OWNER: Ron Wibener RR#, St. Address, Box # : HC 2 Box 39 City, State, ZIP Code : Rolla KS 67954				Latitude: _____																	
				Longitude: _____																	
				Elevation: _____																	
				Datum: _____																	
Data Collection Method: _____																					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 340 ft.																			
<div style="text-align: center;"> N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td></td><td></td><td></td></tr> <tr><td>NW</td><td></td><td>NE</td></tr> <tr><td>W</td><td>X SW</td><td>SE</td></tr> <tr><td></td><td></td><td></td></tr> <tr><td></td><td></td><td>S</td></tr> </table> E </div>					NW		NE	W	X SW	SE						S	Depth(s) Groundwater Encountered 1 151 ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 151 ft. below land surface measured on mo/day/yr 6/11/07 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				
		NW		NE																	
		W	X SW	SE																	
		S																			
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:		5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____ 2 PVC 4 ABS 7 Fiberglass Eagle-Loc Threaded _____ Blank casing diameter 5 in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 18 in., Weight _____ lbs./ft. Wall thickness or gauge No. SDR21																			
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 240 ft. to 260 ft. From 280 ft. to 300 ft. From 320 ft. to 340 ft. From _____ ft. to _____ ft.																			
GRAVEL PACK INTERVALS:		From 25 ft. to 340 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 5 ft. to 25 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? None observed																			
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS															
0	65	Top soil & clay & sand streaks																			
65	78	Sand & gravel																			
78	107	Clay & caliche																			
107	145	Sand fine to coarse																			
145	187	Br clay																			
187	220	Fine sand & clay stks.																			
220	305	Sandy clay & sand stks.																			
305	320	Fine to med sand																			
320	395	Sandy clay																			
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) 6/11/07 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) 6/17/07 under the business name of Tyler Water Well Inc. by (signature) <i>[Signature]</i>																					
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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