

WATER WELL RECORD

Form WWC-5

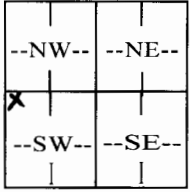
Division of Water Resources; App. No.

I LOCATION OF WATER WELL: County: Barber	Fraction NW $\frac{1}{4}$ NW $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number 11	Township Number T 35 S	Range Number R 11 E/W
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Distance and direction from nearest town or city street address of well if located within city?
400 Main, Kiowa, KS

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

2 WATER WELL OWNER: D&B Stores
 RR#, St. Address, Box # 400 Main
 City, State, ZIP Code Kiowa, KS 67070

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	<p>4 DEPTH OF COMPLETED WELL 22 ft.</p> <p>Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL 12.5 ft. below land surface measured on mo/day/yr 12-16-06 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 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn& garden) 10 Monitoring well</p> <p>Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> X Sample was submitted _____ Water well disinfected? Yes _____ No <input checked="" type="checkbox"/> X If yes, mo/day/yr _____</p>
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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 Threaded X

Blank casing diameter 2 in. to 22 ft., Diameter. _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface 0 in., Weight _____ lbs./ft. Wall thickness or gauge No. SCH40

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 Gauzed 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 22 ft. to 12 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 22 ft. to 10 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 _____
 Grout Intervals: From 10 ft. to 0 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? N/A How many feet? N/A

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5	Topsoil	22	12	10/20 Sand
0.5	1	Light brown clayey silt, dry	12	0	3/8 Bentonite chips
1	4.5	Light brown clayey silt, moist			
4.5	8	Light brown clayey silt, with grey clay			
8	9	Grey clay with silt			
9	12	Sandy silt			
12	15	Fine saturated sand			
15	18	Reddish brown clay			DMW-13

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) 12-16-06 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 01-15-07
 under the business name of Pratt Well Environmental by (signature) *John E. Gill*

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>.