

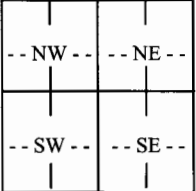
WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Norton	Fraction $\frac{1}{4}$ $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 19	Township Number T 4 S	Range Number R 23 E W
Distance and direction from nearest town or city street address of well if located within city? 5 miles north & 3 east of Lenora		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 39°41'22.3"N 39°41'22.3"N Longitude: 99°56'47.7"W Elevation: _____ Datum: _____ Data Collection Method: _____		

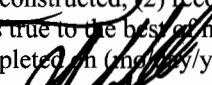
2 WATER WELL OWNER: Craig Remmer
RR#, St. Address, Box # : **1010 West Avenue**
City, State, ZIP Code : **Norton, Kansas 67654**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  W E S	4 DEPTH OF COMPLETED WELL 180 ft. Depth(s) Groundwater Encountered (1)..... 119 ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 119 ft. below land surface measured on mo/day/yr..... 6/30/2008 Pump test data: Well water was..... 138 138 ft. after..... 3 hours pumping..... 25 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) <u>2 Irrigation</u> 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well 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
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5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued... **X**... Clamped.....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....
2 PVC 4 ABS 7 Fiberglass Threaded.....
Blank casing diameter **6**..... in. to **0**..... ft., Diameter **6**..... in. to **140**..... ft., Diameter in. to ft.
Casing height above land surface... **36**..... in., Weight..... lbs./ft. Wall thickness or gauge No. ... **SDR26**.....
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..... **140**..... ft. to **180**..... ft., From ft. to ft.
GRAVEL PACK INTERVALS: From..... **20**..... ft. to **180**..... 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 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 **Existing well**
Direction from well? **South**..... How many feet? **200**.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	20	Top soil & sandy clay	131	140	Sandy clay & fine sand
20	30	Lime & limestone	140	180	Sandy clay w/layers coarse sand to fine gravel & sandstone
30	40	Sandstone w/fine sand & lime layers			
40	52	Sandstone			
52	60	Lime & limestone layers			
60	90	Sandy clay w/layers coarse sand			
90	100	Sandy clay w/layers coarse sand to medium gravel			
100	123	Sandy clay w/limestone layers			
123	131	Medium sand to fine gravel			

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) **6/30/2008** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **433**... This Water Well Record was completed on (mo/day/year) **7/16/2008** under the business name of **Chas. Sargent Irrigation Co., Inc.** by (signature) 

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>.