

WATER WELL RECORD

Form WWC-5

Division 6. Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Norton</u>		Fraction <u>NE</u> <u>SW 1/4 SE 1/4 SE 1/4</u>	Section Number <u>19-18</u>	Township Number T <u>4</u> S	Range Number R <u>23</u> E/W
Distance and direction from nearest town or city street address of well if located within city? <u>5 1/2 North & 3 East of Lenora, KS</u>			Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>39°42'16.9"N</u> Longitude: <u>99°57'02"W</u> Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: RR#, St. Address, Box # : <u>Craig Renner</u> <u>1010 West Avenue</u> City, State, ZIP Code : <u>Norton, Kansas 67654</u>					

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL <u>210</u> ft.	
	Depth(s) Groundwater Encountered (1) <u>112</u> ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <u>112</u> ft. below land surface measured on mo/day/yr. <u>7/10/2008</u> Pump test data: Well water was <u>142</u> ft. after <u>3</u> hours pumping <u>25</u> 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 _____ 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 _____
2 PVC	4 ABS	7 Fiberglass		Threaded _____
Blank casing diameter <u>6</u> in. to <u>0</u> ft., Diameter <u>6</u> in. to <u>150</u> ft., Diameter _____ in. to _____ ft.				
Casing height above land surface <u>36</u> in., Weight _____ lbs./ft.		Wall thickness or gauge No. <u>SDR26</u>		
TYPE OF SCREEN OR PERFORATION MATERIAL:				
1 Steel	3 Stainless Steel	5 Fiberglass	7 PVC	9 ABS
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement
11 Other (Specify) _____				
12 None used (open hole)				
SCREEN OR PERFORATION OPENINGS ARE:				
1 Continuous slot	3 Mill slot	5 Guazed wrapped	7 Torch cut	9 Drilled holes
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut	10 Other (specify) _____
11 None (open hole)				
SCREEN-PERFORATED INTERVALS: From <u>150</u> ft. to <u>210</u> ft., From _____ ft. to _____ ft.				
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>210</u> ft., From _____ ft. to _____ ft.				

6 GROUT MATERIAL:		1 Neat cement	2 Cement grout	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? _____			

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	20	Top soil	140	160	Medium sand & fine sand
20	40	Sandy clay & limestone	160	170	Limestone & sandy clay
40	55	Sandstone & fine sand	170	180	Sandstone & medium gravel
55	60	Sandy clay	180	210	Sandy clay & ochre
60	80	Fine to medium sand & sandy clay			
80	100	Sandy clay & fine sand			
100	110	Medium sand			
110	120	Sandy clay & limestone			
120	135	Sandy clay			
135	140	Fine sand			

CORRECTED

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) <u>7/10/2008</u> and this record is true to the best of my knowledge and belief.	
Kansas Water Well Contractor's License No. <u>433</u>	This Water Well Record was completed on (mo/day/year) <u>7/10/2008</u>
under the business name of <u>Chas. Sargent Irrigation Co., Inc.</u>	by (signature) <u>Karen Wagner</u>

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>.