

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources App. No.

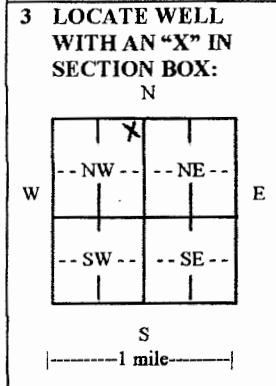
47971

**1 LOCATION OF WATER WELL:** County: Norton Fraction ¼ NE ¼ NE ¼ NW ¼ Section Number 18 Township No. T 4 S Range Number R 23  E  W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here . 649' from N line, 2492' from W line. Well #3 battery #2

**Global Positioning System (GPS) information:**  
 Latitude: ..... (in decimal degrees)  
 Longitude: ..... (in decimal degrees)  
 Elevation: .....  
 Datum:  WGS 84,  NAD 83,  NAD 27  
 Collection Method:  
 GPS unit (Make/Model: .....)  
 Digital Map/Photo,  Topographic Map,  Land Survey  
 Est. Accuracy:  <3 m,  3-5 m,  5-15 m,  >15 m

**2 WATER WELL OWNER:** Craig Renner  
 RR#, Street Address, Box #: 1010 West  
 City, State, ZIP Code : Norton, KS 67654



**4 DEPTH OF COMPLETED WELL 274** ..... ft.

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

Bore Hole Diameter 12..... in. to 274..... ft., and ..... in. to ..... ft.

WELL WATER TO BE USED AS:  Public water supply  Geothermal  Injection well  
 Domestic  Feedlot  Oil field water supply  Dewatering  Other (Specify below)  
 Irrigation  Industrial  Domestic-lawn & garden  Monitoring well

Was a chemical/bacteriological sample submitted to Department?  Yes  No

If yes, mo/day/yr sample was submitted.....

Water well disinfected?  Yes  No

**5 TYPE OF CASING USED:**  Steel  PVC  Other

CASING JOINTS:  Glued  Clamped  Welded  Threaded

Casing diameter 6..... in. to 274..... ft., Diameter..... in. to ..... ft.  
 Casing height above land surface 24..... in., Weight 3.7..... lbs./ft., Wall thickness or gauge No. 0.280.....

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 Steel  Stainless Steel  PVC  Other (Specify) .....  
 Brass  Galvanized Steel  None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:  
 Continuous slot  Mill slot  Gauze wrapped  Torch cut  Drilled holes  None (open hole)  
 Louvered shutter  Key punched  Wire wrapped  Saw cut  Other (specify) .....

SCREEN-PERFORATED INTERVALS: From 214..... ft. to 274..... ft., From..... ft. to ..... ft.  
 From..... ft. to ..... ft., From..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 20..... ft. to 274..... ft., From..... ft. to ..... ft.  
 From..... ft. to ..... ft., From..... ft. to ..... ft.

**6 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other

Grout Intervals: From 0..... ft. to 20..... ft., From..... ft. to ..... ft., From..... ft. to ..... ft.

What is the nearest source of possible contamination:  
 Septic tank  Lateral lines  Pit privy  Livestock pens  Insecticide storage  Other (specify below)  
 Sewer lines  Cesspool  Sewage lagoon  Fuel storage  Abandoned water well  
 Watertight sewer lines  Seepage pit  Feedyard  Fertilizer storage  Oil well/gas well

Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Surface	168	174	Sandy clay
2	20	Loess	174	186	Clay
20	55	Clay	186	206	Sandstone w/ clay str
55	84	Sandstone	206	218	Sandy clay
84	94	Fine to med sand	218	226	Fine sand w/ clay str
94	110	Clay w/ caliche str	226	236	Sandstone w/ clay
110	125	Sandstone w/ clay str	236	252	Clay
125	133	Fine sand w/ sandy clay str	252	265	Fine to med sand w/ lots of clay
133	152	Sandstone w/ clay str	265	270	Fine to med sand w/ clay & ochre st
152	168	Fine to some med sand	270	280	Flint to yellow ochre

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo/day/year) 7/2/13..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 838..... This Water Well Record was completed on (mo/day/year) 7/10/13..... under the business name of D&R Pump Service, LLC..... by (signature).....

**INSTRUCTIONS:** Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>