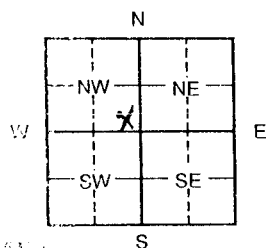


WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

LOCATION OF WATER WELL: Section <u>Decatur</u> Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ <u>1 1/4 miles So of Clayton, 3/4 mile west into</u>	Fraction <u>1/4 SE 1/4 SE 1/4 NW 1/4</u>	Section Number <u>12</u>	Township Number <u>T 4 S</u>	Range Number <u>R 26 E</u> ☒ <u>NW</u>
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				
WATER WELL OWNER: Chuck Griffith RR#, St. Address, Box # <u>HC 1, Box 87</u> City, State, ZIP Code <u>Clayton, Ks 67629</u>				

LOCATE WELL WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL

70 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

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

TYPE OF CASING USED:
☐ Steel ☒ PVC ☐ Other

CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded

Casing diameter 4.5 in. to 50 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.

Casing height above land surface 18 in., Weight 2.38 lbs./ft. Wall thickness or gauge No. .248

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 <u>50</u> ft. to <u>70</u> ft.,	From _____ ft. to _____ ft.
From _____ ft. to _____ ft.,	From _____ ft. to _____ ft.
From <u>20</u> ft. to <u>70</u> ft.,	From _____ ft. to _____ ft.
From _____ ft. to _____ ft.,	From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS:

From _____ ft. to _____ 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	<u>None</u>

Direction from well _____

Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Surface			
2	14	Loess			
14	38	Clay w/caliche strks			
38	47	Fine sand w/clay lenses			
47	63	Fine & med sand w/clay lenses			
63	75	Black shale			

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) 1-5-2011 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 554 or 783 This Water Well Record was completed on (mo/day/year) _____

under the business name of Woofert Pump & Well Inc. by (signature) [Signature]

8 INSTRUCTIONS: Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Geology, 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. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.