

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Cloud	Fraction NW 1/4 SW 1/4 SE 1/4	Section Number 26	Township Number T 6 S	Range Number R 2 <input checked="" type="checkbox"/> (W)
Distance and direction from nearest town or city street address of well if located within city? 3 m. N. + 1/2 mi. E. of AURORA		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Kenneth Johnson RR#, St. Address, Box # : 2206 Noble Rd. City, State, ZIP Code : Concordia, Ks. 66901				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S	<table border="1" style="width: 100%; height: 100px; border-collapse: collapse; text-align: center;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>																
4 DEPTH OF COMPLETED WELL152..... ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 92 ft. below land surface measured on mo/day/yr. 4/17/07 . Pump test data: Well water was.....ft. after..... hours pumping..... gpm Est. Yield 10-20 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 <input checked="" type="checkbox"/> Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well stock Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/>; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input checked="" type="checkbox"/> No																	

5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) <input checked="" type="checkbox"/> PVC 4 ABS 2 Brass 4 Galvanized Steel	5 Wrought Iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped..... Welded..... Threaded.....
Blank casing diameter .. 5 in. to .. 143 ft., Diameter..... in. to ft., Diameter..... in. to ft. Casing height above land surface..... 12 in., Weight..... 2.37lbs./ft. Wall thickness or guage No. 214		
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> 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... 143 ft. to ... 152 ft., From..... ft. to ft. From..... ft. to ft., From..... ft. to ft.		
GRAVEL PACK INTERVALS: From... 22 ft. to ... 152 ft., From..... ft. to ft. From..... ft. to ft., From..... ft. to ft.		

6 GROUT MATERIAL:	1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other
Grout Intervals:	From ... 1 ft. to ... 22 ft., From..... ft. to ft., From..... ft. to ft.
What is the nearest source of possible contamination: None within 1/4 mile.	
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	3	Topsoil			
3	38	Clay, brown w/iron rock			
38	39	Limestone, very hard			
39	100	Shale, red/gray			
100	137	Shale, gray			
137	144	Sandrock/shale & limestone			
144	152	Sandstone, tan			
152	156	Shale, gray			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was () constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **4/17/07**.... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ...**138**..... This Water Well Record was completed on (mo/day/year)**4/18/07**..... under the business name of **Peterson Irrigation, Inc.** by (signature) *Mike Peterson*

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>.