

WATERWELL RECORD

Form **WWC-5**

Division of Water Resources, App. No.

1 LOCATION OF WATER WELL:
 County: Shenandoah Fraction: NE 1/4 NE 1/4 NE 1/4 Section Number: 35 Township Number: T 6 S Range Number: R 28 E/W
 Distance and direction from nearest town or city street address of well if located within city? _____
 Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: Lawrence Schroeder
 RR#, St. Address, Box # : 495 Arrowhead
 City, State, ZIP Code : Colby, KS 67701

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

	NW	NE	
W			X
	SW	SE	
	S		

4 DEPTH OF COMPLETED WELL 190 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: 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well 12 Other (Specify below) _____
 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

5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 8 Concrete tile
 2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) _____
CASING JOINTS: Glued X Clamped.....
 Welded..... Threaded.....
 Blank casing diameter 4.5 in. to 150 ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
 Casing height above land surface 10 in., Weight 2.32 lbs./ft. Wall thickness or gauge No. 2.42

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 150 ft. to 190 ft., From..... ft. to..... ft.
GRAVEL PACK INTERVALS: From 20 ft. to 190 ft., From..... ft. to..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 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:
 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 None
 Direction from well?..... How many feet?.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Surface	86	112	Fine med sd w/ calcite streaks
2	5	Loess	112	140	clay & calcite w/ some lenses
5	12	Fine to med sd w/ calcite lenses	140	150	Fine to some med sd w/ calcite lenses
12	30	clay & calcite w/ sand streaks			
30	43	clay & calcite w/ traces of sand	150	187	Fine to med sd w/ clay lenses
43	50	Fine to med sd w/ calcite lenses	187	195	Yellow loess
50	58	Fine to med sd w/ clay & calcite streaks			
58	64	calcite			
64	86	Fine to some med sd w/ clay & calcite streaks			
86	86	calcite w/ sand lenses			

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) 5-13-08, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 783. This Water Well Record was completed on (mo/day/year) 6-30-08 under the business name of Water Pumping Well Inc. by (signature) [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.kdheks.gov/waterwell/index.html>.