

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

14037

1 LOCATION OF WATER WELL: County: THOMAS		Fraction ¼ SW ¼ SW ¼ SE ¼	Section Number 11	Township No. T 6 S	Range Number R 34 <input type="checkbox"/> E <input checked="" type="checkbox"/> W				
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 10 MILES NORTH, 1 WEST OF COLBY, KANSAS			Global Positioning System (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m						
2 WATER WELL OWNER: HARLAN DOWNING RR#, Street Address, Box #: 1565 W 5TH ST City, State, ZIP Code : COLBY KS 67701									
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N <table border="1" style="width:100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width:50%;">NW</td> <td style="width:50%;">NE</td> </tr> <tr> <td>SW</td> <td>SE</td> </tr> </table> S -----1 mile-----		NW	NE	SW	SE	4 DEPTH OF COMPLETED WELL 280..... ft. Depth(s) Groundwater Encountered (1). 171..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 171..... ft. below land surface measured on mo/day/yr..... Pump test data: Well water was 350..... ft. after..... hours pumping..... gpm EST. YIELD 350..... gpm. Well water was..... ft. after..... hours pumping..... gpm Bore Hole Diameter 26..... in. to 280..... ft., and in. to ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
NW	NE								
SW	SE								
5 TYPE OF CASING USED: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter .16..... in. to 280..... ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 12..... in., Weight lbs./ft., Wall thickness or gauge No. 250..... TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input checked="" type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input checked="" type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From 280..... ft. to 260..... ft., From ft. to ft. From 260..... ft. to 200..... ft., From ft. to ft. GRAVEL PACK INTERVALS: From 280..... ft. to 20..... ft., From ft. to ft. From ft. to ft., From ft. to ft.									
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From 20..... ft. to 0..... ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: <input checked="" type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Direction from well WEST..... Distance from well 1/2 MILE.....									
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS				
158	170	SAND - GRAVEL							
170	180	FINE TO MED. SAND							
180	182	SANDY CLAY							
182	195	SAND & GRAVEL							
195	203	CLAY							
203	224	FINE SAND							
224	255	SAND & GRAVEL							
255	280	SHALE							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 2-6-2013..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 722..... This Water Well Record was completed on (mo/day/year) under the business name of WESTERN SPRINKLERS, INC..... by (signature) <i>Paul H. Mable</i> INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) 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 .									