

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

*Well 1 of 3
Battery of 3
47,705*

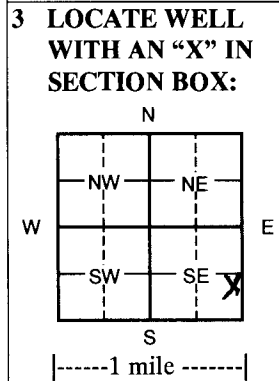
1 LOCATION OF WATER WELL: Fraction *NE 1/4 NE 1/4 SE 1/4* Section Number *16* Township Number *9* Range Number *25* E W
County: *Graham*

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
East well - 7 miles south of Hope, 18 miles east

Global Positioning System (GPS) information:
Latitude: _____ (in decimal degrees)
Longitude: _____ (in decimal degrees)
Elevation: _____

2 WATER WELL OWNER: **Lawrence Simon**
RR#, St. Address, Box # *1999 130th Ave*
City, State, ZIP Code *Morland, Ks 67650-5022*

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



4 DEPTH OF COMPLETED WELL *150* ft.
Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
WELL'S STATIC WATER LEVEL *98* 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

5 TYPE OF CASING USED: Steel PVC Other _____
CASING JOINTS: Glued Clamped Welded Threaded
Casing diameter *8* in. to *110* ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface *18* in., Weight *332* lbs./ft. Wall thickness or gauge No. *5.594*

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 *110* ft. to *150* ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From *20* ft. to *150* 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 *None*

Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Surface	91	101	Clay & caliche w/fine sand strks
2	11	Loess	101	114	Fine to some med sd w/clay & caliche lenses
11	24	Fine sd w/clay & caliche strks	114	123	Fine to med sand & small gravel w/traces
24	32	Fine sand			Of clay
32	40	Fine sand w/caliche strks & clay lenses	123	143	Sandstone w/caliche & sand strks & clay
40	54	Clay 7 caliche w/sand strks			Lenses
54	72	Sandy clay & fine sand mix w/clay & Caliche strks	143	155	Yellow ochre
72	80	Fine sand w/clay & caliche strks			
80	91	Fine to med sd w/clay strks & cal lenses			

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) *7-20-11* and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. *554* This Water Well Record was completed on (mo/day/year) *8-12-11*
under the business name of **Woofer Pump & Well Inc.** by (signature) *Janice Woofer*

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 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. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.