

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: <u>Reno</u>	Fraction <u>SW 1/4 NE 1/4 NW 1/4 SE 1/4</u>	Section Number <u>32</u>	Township No. <u>T 24 S</u>	Range Number <u>R 9</u> <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"/> .		Global Positioning System (GPS) information: Latitude: <u>37.91743</u> (in decimal degrees) Longitude: <u>098.33193</u> (in decimal degrees) Elevation: <u>1723</u> Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input checked="" type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: <u>Garmin 60CSx</u>) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input checked="" type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
2 WATER WELL OWNER: <u>David Johnson</u> RR#, Street Address, Box #: <u>5428 Ianazio Farias</u> City, State, ZIP Code : <u>EIPaso, Tx. 79934</u>				

<p>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</p> <p style="text-align: center;">N</p> <table style="margin: auto; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 5px;">NW</td> <td style="border: 1px solid black; padding: 5px;">NE</td> </tr> <tr> <td style="border: 1px solid black; padding: 5px;">SW</td> <td style="border: 1px solid black; padding: 5px;">SE</td> </tr> </table> <p style="text-align: center;">S</p> <p style="text-align: center;"> -----1 mile----- </p>	NW	NE	SW	SE	<p>4 DEPTH OF COMPLETED WELL <u>75</u>..... ft.</p> <p>Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.</p> <p>WELL'S STATIC WATER LEVEL <u>32</u>..... ft. below land surface measured on mo/day/yr.....</p> <p>Pump test data: Well water was.....ft. after..... hours pumping..... gpm</p> <p>EST. YIELD.....gpm. Well water was.....ft. after..... hours pumping..... gpm</p> <p>Bore Hole Diameter <u>9.7/8</u>.....in. to <u>7.5</u>.....ft., and.....in. to.....ft.</p> <p>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 checked="" type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well <u>stock</u></p> <p>Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, mo/day/yr sample was submitted.....</p> <p>Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
NW	NE				
SW	SE				

5 TYPE OF CASING USED: Steel PVC Other

CASING JOINTS: Glued Clamped Welded Threaded

Casing diameter .5..... in. to .55..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.

Casing height above land surface.. 20..... in., Weight 160.....lbs./ft., Wall thickness or gauge No. 214.....

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 .55..... ft. to .75..... ft., From..... ft. to..... ft.
 From..... ft. to..... ft., From..... ft. to..... ft.

GRAVEL PACK INTERVALS: From .75..... ft. to .20..... 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 .20..... ft. to .0..... 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	15	Sandy Top Soil			
15	25	Tan Clay			
25	35	Medium Sand and Tan Clay 50/50			
35	50	Tan Clay			
50	60	Medium Sand, Tan Clay 50/50			
60	75	Medium Sand			

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) 7-24-09..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134..... This Water Well Record was completed on (mo/day/year) 7-28-09..... under the business name of Rosencrantz-Bemis Ent...... by (signature) [Signature]

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 785-296-5522. 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>.