

## WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:		Fraction SW 1/4 SE 1/4 SW 1/4	Section Number 12	Township Number T 11 S	Range Number R 6 E/V
Distance and direction from nearest town or city street address of well if located within city? <b>POL Site 1245, Ft. Riley Army Base</b>					
2 WATER WELL OWNER:		US Army DPW-Environmental Div. 404 Pershing Court Fort Riley, KS 66442			
		Board of Agriculture, Division of Water Resources Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL ..... 30.5 ..... ft. ELEVATION: ..... 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 ..... NA ..... ft. after ..... hours pumping ..... gpm Est. Yield ..... NA ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter ..... 11 ..... in. to ..... 32 ..... ft. and ..... in. to ..... ft. 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 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Extraction 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 BLANK CASING USED:		5 Wrought iron 1 Steel 2 PVC	6 Asbestos-Cement 3 RMP (SR) 4 ABS	7 Fiberglass 8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued ..... Clamped ..... Welded ..... Threaded. ✓
Blank casing diameter ..... 4 ..... in. to ..... 15.5 ..... ft. Dia ..... in. to ..... ft. Dia ..... in. to ..... ft.					
Casing height above land surface ..... -0.5 ..... in., weight ..... lbs./ft. Wall thickness or gauge No. ..... Sch. 40 SS.					
TYPE OF SCREEN OR PERFORATION MATERIAL					
1 Steel 2 Brass	3 Stainless steel 4 Galvanized steel	5 Fiberglass 6 Concrete tile	7 PVC 8 RMP (SR) 9 ABS	10 Asbestos-cement 11 Other (specify) 12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 2 Louvered shutter	3 Mill slot 4 Key punched	5 Gauzed wrapped 6 Wire wrapped 7 Torch cut	8 Saw cut 9 Drilled holes 10 Other (specify)	11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From ..... 15.5 ..... ft. to ..... 30.5 ..... ft. From ..... ft. to ..... ft.					
From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
GRAVEL PACK INTERVALS: From ..... 13 ..... ft. to ..... 32 ..... ft. From ..... ft. to ..... ft.					
From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other ..... Grout Intervals: From ..... 4.5 ..... ft. to ..... 8 ..... ft. From ..... 8 ..... ft. to ..... 13 ..... 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 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) How many feet?					
7 DIRECTION FROM WELL?					
FROM	TO	LITHOLOGIC LOG		FROM	TO
0	4	Clay, lean (CL), Dark Brown			
4	16	Sand, fine (SP), Brownish Gray			
16	20	Sand, fine to med.,			
20	30	Sand, med. (SP), Gray			
PLUGGING INTERVALS Lat = 39.103228 Long = -96.719867 WGS 84					
DPE17 POL Site 1245					
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) ..... 9/29/2009 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ..... 527 ..... This Water Well Record was completed on (mo/day/yr) ..... 12/3/09 ..... under the business name of ..... GeoCore, Inc. ..... by (signature) ..... Dale Rohr					
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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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