

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL: County: Geary		Fraction SW ¼ NE ¼ SW ¼		Section Number 12	Township Number T 12 S	Range Number R 05 (E)							
Distance and direction from nearest town or city street address of well if located within city? 326 S. WASHINGTON ST. JUNCTION CITY, KANSAS				Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____									
2 WATER WELL OWNER: City of Junction City – Dave Hurley RR#, St. Address, Box # : 700 N. Jefferson City, State, ZIP Code : Junction City, KS 66441		3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL _____ 40' _____ ft.									
<table border="1" style="margin-left: auto; margin-right: auto; text-align: center;"> <tr><td colspan="2">N</td></tr> <tr><td>NW</td><td>NE</td></tr> <tr><td>X SW</td><td>SE</td></tr> <tr><td colspan="2">S</td></tr> </table>		N		NW	NE	X SW	SE	S		Depth(s) Groundwater Encountered 1 _____ ~ 32' _____ ft. 2 _____ ft. 3 _____ ft.			
		N											
NW	NE												
X SW	SE												
S													
WELL'S STATIC WATER LEVEL 36.60 ft. below land surface measured on mo/day/yr 09/27/2007 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 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well		Was a chemical/bacteriological sample submitted to Department? Yes _____ No X ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes _____ No X											
5 TYPE OF CASING USED:		5 Wrought Iron		8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____							
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below) _____ Welded _____							
2 PVC		4 ABS		7 Fiberglass		Threaded _____							
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Casing height below land surface 3.48 in., Weight _____ lbs./ft. Wall thickness or gauge No. _____		TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC							
2 Brass		4 Galvanized steel		6 Concrete tile		8 RM (SR)							
9 ABS		11 Other (specify) _____		12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:													
1 Continuous slot		3 Mill slot		5 Guaze wrapped		7 Torch cut							
2 Louvered shutter		4 Key punched		6 Wire wrapped		8 Saw Cut							
9 Drilled holes		11 None (open hole)		10 Other (specify) _____									
SCREEN-PERFORATED INTERVALS: From _____ 25 ft. to _____ 40 ft. From _____ ft. to _____ ft.													
GRAVEL PACK INTERVALS: From _____ 23 ft. to _____ 40 ft. From _____ ft. to _____ ft.													
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____													
Grout Intervals From _____ 1 ft. to _____ 23 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							
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage							
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage							
						13 Insecticide Storage							
						14 Abandoned water well							
						15 Oil well/ gas well							
						16 Other (specify below) Lust Site							
Direction from well? _____				How many feet? _____									
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS								
0	1	Top soil											
1	12	Clay, silty											
12	38	Sand, very fine to medium											
38	40	Sand, clayey											
						MW4							
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) 09/26/2007 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 594 . This Water Well Record was completed on (mo/day/year) 11/26/2007 under the business name of Coranco Great Plains, Inc. by (signature) _____													
INSTRUCTIONS: Please fill in blanks 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 .													