

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Marion	Fraction SE $\frac{1}{4}$ SW $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number 11	Township Number T 18 S	Range Number R 4 <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? HWY 56; Lincolnville, KS		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Agri-Producers Co-op RR#, St. Address, Box # 502 W. 6th City, State, ZIP Code Lincolnville, KS 66858				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL 32.5 ft.															
<table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"> </td><td style="width: 20px; height: 20px;"> </td><td style="width: 20px; height: 20px;"> </td></tr> <tr><td style="text-align: center;">--NW--</td><td style="text-align: center;">--NE--</td><td style="text-align: center;"> </td></tr> <tr><td style="text-align: center;"> </td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> <tr><td style="text-align: center;">--SW--</td><td style="text-align: center;">--SE--</td><td style="text-align: center;"> </td></tr> <tr><td style="text-align: center;"> </td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> </table>				--NW--	--NE--					--SW--	--SE--					Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL 28.2 K below land surface measured on mo/day/yr 3-1-06 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 <input checked="" type="checkbox"/> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <input checked="" type="checkbox"/> Irrigation 4 Industrial 7 Domestic (lawn& garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr _____ Sample was submitted _____ Water well disinfected? Yes <input checked="" type="checkbox"/> No _____
--NW--	--NE--															
--SW--	--SE--															

5 TYPE OF CASING USED:	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	Welded _____
<input checked="" type="checkbox"/> 2 PVC	4 ABS	7 Fiberglass	Threaded _____
Blank casing diameter 5 in. to 27 ft., Diameter	24 in. to _____ ft., Diameter	_____ in. to _____ ft., Diameter	_____ in. to _____ ft., Diameter
Casing height above land surface _____ in.	Weight _____ lbs./ft.	Wall thickness or guage No. SCH160	_____
TYPE OF SCREEN OR PERFORATION MATERIAL:			
1 Steel	3 Stainless Steel	5 Fiberglass	<input checked="" type="checkbox"/> 7 PVC
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)
9 ABS 10 Asbestos-Cement 11 Other (Specify) _____ 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:			
1 Continuous slot	<input checked="" type="checkbox"/> 3 Mill slot	5 Gauzed wrapped	7 Torch cut
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut
9 Drilled holes 11 None (open hole)			
SCREEN-PERFORATED INTERVALS: From 32.5 ft. to 27 ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From 40.4 ft. to 21.9 ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite
Grout Intervals: From 61 ft. to 40.4 ft., From 21.9 ft. to 2 ft., From _____ ft. to _____ ft.	4 Other _____		
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
Direction from well? SE		13 Insecticide Storage 14 Abandoned water well below 15 Oil well/gas well 16 Other (specify _____) How many feet? 200	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	12	Clay	61	40.4	3/8 Bentonite chips
12	16	Grey/tan shale	40.4	21.9	Pea Gravel pack
16	32	Grey shale with limestone	21.9	2	3/8 Bentonite chips
32	45	Black shale	2	0	Cement
45	50	Grey/black shale with limestone			
50	61	red/brown shale			
					Co-op supply well replacement

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) 2-28-06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 7-20-06 under the business name of Pratt Well Environmental by (signature) *Pratt Well Environmental*

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, Geology Section, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612- 1 367. 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.kdhe.state.ks.us/geo/waterwells>.