

WATER WELL RECORD

Form WWC-5

1 LOCATION OF WATER WELL: County: <u>Cherokee</u>	Fraction <u>NW 1/4 NE 1/4 SE 1/4</u>	Section Number <u>26</u>	Township Number <u>T 32 S</u>	Range Number <u>R 22 W</u>
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Distance and direction from nearest town or city street address of well if located within city? 3600 NW 74th Street Columbus, MS 66725

Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: Chemex I
 RR#, St. Address, Box # : 16 South Pennsylvania
 City, State, ZIP Code : Oklahoma City, OK 73107

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

--NW--		--NE--	
--SW--		--SE--	

W E

S

4 DEPTH OF COMPLETED WELL 13 ft.

Depth(s) Groundwater Encountered (1)..... 13 ft. (2)..... _____ ft. (3)..... _____ ft.

WELL'S STATIC WATER LEVEL..... 10-9-07ft. below land surface measured on mo/day/yr. 10-9-07 ..

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 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 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:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued..... Clamped.....
<input checked="" type="checkbox"/> PVC	4 ABS	7 Fiberglass		Welded.....
				Threaded..... <input checked="" type="checkbox"/>

Blank casing diameter 2 in. to 11 ft., Diameter..... _____ in. to _____ ft., Diameter _____ in. to _____ ft.

Casing height above land surface..... Flush in., Weight _____ lbs./ft. Wall thickness or gauge No. sch. 40

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<input checked="" type="checkbox"/> PVC	9 ABS	11 Other (Specify)
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<input checked="" type="checkbox"/> Mill slot	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 Saw Cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From..... 13 ft. to 11 ft., From _____ ft. to _____ ft.

From..... _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From..... 13 ft. to 9 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 Concrete

Grout Intervals: From..... 9 ft. to 3 ft., From..... 3 ft. to 0 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	13 Insecticide Storage	<input checked="" type="checkbox"/> Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well	<u>Explosive Facility</u>

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>9</u>	<u>Silty Clays, Brown, Stiff</u>			
<u>9</u>	<u>13</u>	<u>Weathered Shale, Brown</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) .. 11-1-07 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 710 This Water Well Record was completed on (mo/day/year) .. 11-9-07 under the business name of Below Ground Surface, Inc. by (signature) [Signature]

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, 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/index.html>.