

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Trego	Fraction 1/4 NE 1/4 NE 1/4 NW 1/4	Section Number 34	Township No. T 11 S	Range Number R 22 <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"/> Approximately 4.5 miles north and 1 mile west of Ogallah.		Global Positioning System (GPS) information: Latitude: 39.059224 (in decimal degrees) Longitude: -99.752629 (in decimal degrees) Elevation: Unknown Datum: <input type="checkbox"/> WGS 84, <input checked="" type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: WAAS) <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: City of Ellis RR#, Street Address, Box #: 815 Jefferson City, State, ZIP Code : Ellis, KS 67637				

3 LOCATE WELL WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL 95 ft.
	Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
	WELL'S STATIC WATER LEVEL 35.30 ft. below land surface measured on 03/17/15 mo/day/yr
	Pump test data: Well water was <input type="checkbox"/> not checked <input type="checkbox"/> ft. after _____ hours pumping _____ gpm
	EST. YIELD _____ gpm. Well water was _____ ft. after _____ hours pumping _____ gpm
Bore Hole Diameter 5 in. to 96 ft., and _____ in. to _____ ft.	
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) Observation Well <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well	
Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted _____	
Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

5 TYPE OF CASING USED: Steel PVC Other _____

CASING JOINTS: Glued Clamped Welded Threaded Other (Specify) _____

Casing diameter **2** in. to **58** ft., Diameter **2** in. to **93** ft., Diameter _____ in. to _____ ft.

Casing height above land surface **24** in., Weight **70** lbs./ft., Wall thickness or gauge No. **154**

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 **58** ft. to **83** ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **40** ft. to **96** ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Intervals: From **0** ft. to **40** 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 **None Known**
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well

Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	4	Topsoil	40	45	Clay, brown
4	6	Clay, brown, sandy	45	47	Sand, fine to coarse
6	7	Sand, gravel, fine to coarse	47	51	Clay, brown, gray
7	9	Clay, brown, sand streaks	51	52	Sand, fine
9	15	Sand, fine to coarse	52	56	Clay, gray, yellow, brown
15	19	Sand, gravel, fine to coarse	56	66	Sand, fine
19	22	Cemented sand, white clay	66	72	Sand, fine, chunky
22	28	Sand, fine to coarse, fine gravel	72	79	Sand, fine, brown, yellow clay streaks
28	39	Clay, gray, fine sand streaks	79	83	Sand, fine to coarse, some brown clay
39	40	Clay, gray, brown	83	92	Clay, brown, white, caliche (cont.)

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) **03/17/15** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **185** This Water Well Record was completed on (mo/day/year) **03/26/15**
under the business name of **Clarke Well & Equipment, Inc.** by (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>.

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

I LOCATION OF WATER WELL:	Fraction	Section Number	Township No.	Range Number
County: Trego	1/4 NE 1/4 NE 1/4 NW 1/4	34	T 11 S	R 22 <input type="checkbox"/> E <input checked="" type="checkbox"/> W

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
92	94	Clay, white, yellow			
94	96	Shale, brown			

RECEIVED
 APR 30 2015
 KS GEO SURVEY