

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

<p>1 LOCATION OF WATER WELL: County: <u>Ellis</u></p>	<p>Fraction <u>1/4 SE 1/4 SE 1/4</u></p>	<p>Section Number <u>33</u></p>	<p>Township Number T <u>13</u> S</p>	<p>Range Number R <u>18</u> E/W</p>																																																						
<p>Distance and direction from nearest town or city street address of well if located within city? <u>1608 Main - Hays, Ks</u></p>		<p>Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____</p>																																																								
<p>2 WATER WELL OWNER: <u>John Bird</u> RR#, St. Address, Box # : <u>1608 Main</u> City, State, ZIP Code : <u>Hays, Ks. 67601</u></p>	<p>4 DEPTH OF COMPLETED WELL <u>59</u> ft.</p> <p>Depth(s) Groundwater Encountered (1) <u>43</u> ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <u>43</u> ft. below land surface measured on mo/day/yr. _____ Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield. <u>25</u> 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 <u>Domestic (lawn & garden)</u> 10 Monitoring well _____</p> <p>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 _____ No _____</p>																																																									
<p>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</p> <p style="text-align: center;">N</p> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">W</td> <td style="width: 40px; text-align: center;">--NW--</td> <td style="width: 40px; text-align: center;">--NE--</td> <td style="width: 20px; text-align: center;">E</td> </tr> <tr> <td></td> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">--SW--</td> <td style="text-align: center;">--SE--</td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> <td></td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;">S</td> <td></td> </tr> </table>	W	--NW--	--NE--	E						--SW--	--SE--							S			<p>5 TYPE OF CASING USED:</p> <table style="width: 100%;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>6 Asbestos-Cement</td> <td>9 Other (specify below)</td> </tr> <tr> <td>2 PVC</td> <td>4 ABS</td> <td>7 Fiberglass</td> <td></td> </tr> </table> <p>Blank casing diameter _____ in. to _____ ft., Diameter. _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface <u>18</u> in., Weight <u>160</u> lbs./ft. Wall thickness or gauge No. <u>SDR26</u></p> <p>TYPE OF SCREEN OR PERFORATION MATERIAL:</p> <table style="width: 100%;"> <tr> <td>1 Steel</td> <td>3 Stainless Steel</td> <td>5 Fiberglass</td> <td>7 <u>PVC</u></td> <td>9 ABS</td> <td>11 Other (Specify) _____</td> </tr> <tr> <td>2 Brass</td> <td>4 Galvanized Steel</td> <td>6 Concrete tile</td> <td>8 RM (SR)</td> <td>10 Asbestos-Cement</td> <td>12 None used (open hole)</td> </tr> </table> <p>SCREEN OR PERFORATION OPENINGS ARE:</p> <table style="width: 100%;"> <tr> <td>1 Continuous slot</td> <td>3 Mill slot</td> <td>5 Gauzed wrapped</td> <td>7 Torch cut</td> <td>9 Drilled holes</td> <td>11 None (open hole)</td> </tr> <tr> <td>2 Louvered shutter</td> <td>4 Key punched</td> <td>6 Wire wrapped</td> <td>8 Saw Cut</td> <td>10 Other (specify) _____</td> <td></td> </tr> </table> <p>SCREEN-PERFORATED INTERVALS: From <u>59</u> ft. to <u>39</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.</p> <p>GRAVEL PACK INTERVALS: From <u>59</u> ft. to <u>39</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.</p>				1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	2 PVC	4 ABS	7 Fiberglass		1 Steel	3 Stainless Steel	5 Fiberglass	7 <u>PVC</u>	9 ABS	11 Other (Specify) _____	2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)	1 Continuous slot	3 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) _____			
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<p>6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____</p> <p>Grout Intervals: From <u>0</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.</p> <p>What is the nearest source of possible contamination:</p> <table style="width: 100%;"> <tr> <td>1 Septic tank</td> <td>4 Lateral lines</td> <td>7 Pit privy</td> <td>10 Livestock pens</td> <td>13 Insecticide Storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>5 Cess pool</td> <td>8 Sewage lagoon</td> <td>11 Fuel storage</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>3 <u>Watertight sewer lines</u></td> <td>6 Seepage pit</td> <td>9 Feedyard</td> <td>12 Fertilizer Storage</td> <td>15 Oil well/gas well</td> <td></td> </tr> </table> <p>Direction from well? <u>WEST</u> How many feet? <u>60</u></p>					1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	16 Other (specify below)	2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well		3 <u>Watertight sewer lines</u>	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well																																					
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<p>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u>, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>5.20.07</u>... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>478</u>... This Water Well Record was completed on (mo/day/year) <u>5.20.07</u>... under the business name of <u>John Bird Water Well</u> by (signature) <u>John Bird</u></p> <p>INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html.</p>																																																										