

**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No.  

<b>1 LOCATION OF WATER WELL:</b>	Fraction County: <b>Russell</b> <b>SE ¼ NE ¼ SW ¼</b>	Section Number <b>7</b>	Township Number <b>T 14 S</b>	Range Number <b>R 11 (W)</b>
Distance and direction from nearest town or city street address of well if located within city? <b>601 Hwy 231, Dorrance, Kansas</b>		<b>Global Positioning System</b> (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
<b>2 WATER WELL OWNER: Agco, Inc. - David Zielke</b> RR#, St. Address, Box # : <b>P.O. Box 668</b> City, State, ZIP Code : <b>Russell, KS 67665</b>				

<b>3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:</b>	<b>4 DEPTH OF COMPLETED WELL</b> <u>54</u> ft.
<div style="text-align: center;"> </div>	Depth(s) Groundwater Encountered 1 <u>42</u> ft. 2 _____ ft. 3 _____ ft.
	WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr
	Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
	Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
<b>WELL WATER TO BE USED AS:</b> 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 <u>X</u> ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes _____ No <u>X</u>	

<b>5 TYPE OF CASING USED:</b>	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 <u>X</u>
Blank casing diameter <u>2</u> in. to <u>34</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.	
Casing height above land surface <u>6.60</u> in., Weight _____ lbs./ft. Wall thickness or gauge No. <u>Sch. 40 PVC</u>	
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>	
1 Steel    3 Stainless steel    5 Fiberglass (7 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)	
<b>SCREEN OR PERFORATION OPENINGS ARE:</b>	
1 Continuous slot (3 Mill slot)    5 Guaze 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) _____	
<b>SCREEN-PERFORATED INTERVALS:</b> From <u>34</u> ft. to <u>54</u> ft. From _____ ft. to _____ ft.	
<b>GRAVEL PACK INTERVALS:</b> From <u>32</u> ft. to <u>54</u> ft. From _____ ft. to _____ ft.	

<b>6 GROUT MATERIAL:</b>	1 Neat cement    2 Cement grout    (3 Bentonite)    4 Other _____ Grout Intervals From <u>1</u> ft. to <u>32</u> 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    13 Insecticide Storage    16 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>Lust. Site</u>	
Direction from well? _____ How many feet? _____	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top soil			
1	31	Clay, silty			
31	40	Clay, sandy			
40	54	Sand, very fine to fine, well sorted			
					MWB

**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) 04-24-2007 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) 5/22/07 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>.