

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

Well #2 - South production Well

1 LOCATION OF WATER WELL: County: Saline		Fraction $\frac{1}{4}$ NW $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 26	Township No. T 14 S	Range Number R 3 ☐ E ☒ W																																																												
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ . intersection of Cloud & Broadway, Salina, KS			Global Positioning System (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27 Collection Method: ☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m																																																														
2 WATER WELL OWNER: USD 305, Hageman Op. Ctr. RR#, Street Address, Box #: 409 W. Cloud City, State, ZIP Code : Salina, KS 67401																																																																	
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N <table border="1" style="width:100%; text-align: center;"> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table> E S -----1 mile-----																		4 DEPTH OF COMPLETED WELL 59 ft. #2 Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 32.5 ft. below land surface measured on mo/day/yr... 5/8/12 Pump test data: Well water was ft. after hours pumping gpm EST. YIELD 200 gpm. Well water was ft. after hours pumping gpm Bore Hole Diameter 12 in. to 59 ft., and in. to ft. WELL WATER TO BE USED AS: ☐ Public water supply ☒ Geothermal ☐ Injection well ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well Pump & Dump 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: ☐ Steel ☒ PVC ☐ Other CASING JOINTS: ☒ Glued ☐ Clamped ☐ Welded ☐ Threaded Casing diameter 8 in. to 37 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 12 in., Weight 5.72 lbs./ft., Wall thickness or gauge No. 332 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 37 ft. to 59 ft., From ft. to ft. GRAVEL PACK INTERVALS: From 24 ft. to 59 ft., From ft. to ft. From ft. to ft., From ft. to ft.																																																																	
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other Grout Intervals: From 3 ft. to 24 ft., From ft. to 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 ☒ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well Direction from well North Distance from well 300 ft.																																																																	
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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) ... 5/8/12 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/year) ... 5/11/12 under the business name of Peterson Irrigation, Inc. by (signature) <i>Mike Peterson</i>																																																																	
INSTRUCTIONS: Use typewriter or ball point pen. <i>PLEASE PRESS FIRMLY</i> and <i>PRINT</i> 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 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html .																																																																	