

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

0047883

1 LOCATION OF WATER WELL: County: Scott SE 1/4		Fraction NW 1/4 NW 1/4 SW 1/4	Section Number 19	Township Number T 18 S	Range Number R 32 E/W
Distance and direction from nearest town or city street address of well if located within city? 202 Nonamaker; Scott City			Global Positioning Systems (decima. degrees, min. of 4 digits) Latitude: 38.473719 Longitude: 100.905657 Elevation: 2957.42' TOC Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: RR#, St. Address, Box # : Presto #1 1310 S. Main Street City, State, ZIP Code : Scott City KS					

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E --NW-- --NE-- X --SW-- --SE-- S	4 DEPTH OF COMPLETED WELL .172..... ft.	
	Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 131.67 ft. below land surface measured on mo/day/yr. 5/29/12 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) 10 Monitoring well MW-5	
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 <input checked="" type="checkbox"/>		

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued..... Clamped.....
2 PVC	4 ABS	7 Fiberglass		Welded.....
				Threaded.....

Blank casing diameter **4**..... in. to **172**..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
 Casing height above land surface **0.35**..... in., Weight..... lbs./ft. Wall thickness or guage No. **Schedule 40**.....

TYPE OF SCREEN OR PERFORATION MATERIAL:

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)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	0.01" 5 Guazed 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 **134**..... ft. to **172**..... ft., From..... ft. to..... ft.
 From..... ft. to..... ft., From..... ft. to..... ft.
GRAVEL PACK INTERVALS: From **132**..... ft. to **172**..... 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.....

Grout Intervals: From **0**..... ft. to **132**..... 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	

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Grass			
10	27	SILT			
27	32	SAND			
32	44	Silty CLAY			
44	57	SAND			
57	65	Silty CLAY			
65	100	SAND			
100	112	Sandy CLAY			
112	131	Silty CLAY			
131	172	SAND			

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) **5/29/12** and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. **554**..... This Water Well Record was completed on (mo/day/year) **10/20/12**
 under the business name of **Woolter Pump & Well** 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.kdhe.state.ks.us/geo/waterwells>.