

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Scott 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"/> East Rd. 200 & North Pawnee Rd. 1322' East & 50' South	Fraction <div style="text-align: center;">¼ NW ¼ NE ¼ NW ¼</div>	Section Number <div style="text-align: center;">26</div>	Township No. <div style="text-align: center;">T 17 S</div>	Range Number <div style="text-align: center;">R 32 <input type="checkbox"/> E <input checked="" type="checkbox"/> W</div>	
2 WATER WELL OWNER: Brookover Cattle Co. RR#, Street Address, Box #: 4000 E. Rd. 200 City, State, ZIP Code : Scott City, KS 67871		Global Positioning System (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m			
3 LOCATE WELL WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> </div>	4 DEPTH OF COMPLETED WELL 186 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL 141 ft. below land surface measured on mo/day/yr..... Pump test data: Well water was 172 ft. after 4 hours pumping 20 gpm EST. YIELD 20 gpm. Well water was ft. after hours pumping gpm Bore Hole Diameter 11 in. to 186 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 checked="" type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
5 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter 6 in. to 146 ft., Diameter 11 in. to ft., Diameter in. to ft. Casing height above land surface 18 in., Weight 200 lbs./ft., Wall thickness or gauge No. SDR21 TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input checked="" type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From 146 ft. to 186 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 25 ft. to 186 ft., From ft. to ft. From ft. to ft., From ft. to ft.					
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From 5 ft. to 25 ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input checked="" type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Direction from well North Distance from well 120'					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Top Soil	84	97	Brown Clay With Fine Sand Streaks
2	33	Brown Clay	97	102	Cemented Sand
33	35	Brown Clay With Gypsum	102	106	Fine To Medium Sand
35	42	Cemented Sand	106	114	Brown Clay With Fine To Med. Sand St
42	45	Medium To Coarse Sand Small Gravel	114	122	Fine To Med Sand Small Gravel Few
45	58	Cemented Sand Few Loose Sand Str.			Small Brown Clay Streaks
58	62	Brown Clay With Few Small Sand Str.	122	128	Fine To Medium Sand Some Small Grav
62	72	Med-Cor Sand Small Gravel Cem. Str.	128	131	Brown Clay
72	80	Med-Cor Sand Small Gravel White Roc	131	160	Fine To Medium Sand Few Small Brown
80	84	Brown Clay			Clay Streaks
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 7-19-19 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 532 This Water Well Record was completed on (mo/day/year) 8-27-19 under the business name of Midwest Well & Pump 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 .					

Check: ☐ White Copy, ☐ Blue Copy, ☐ Pink Copy