

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Scott</u>	Fraction <u>NE 1/4 NE 1/4 SW 1/4</u>	Section Number <u>13</u>	Township Number <u>T 17 S</u>	Range Number <u>R 33 (W)</u>
Distance and direction from nearest town or city street address of well if located within city?		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		

2 WATER WELL OWNER: Scott City Dairy
RR#, St. Address, Box # : 90 Bruce Wilkens
City, State, ZIP Code : 230 Hwy 4 Scott City, KS 61871

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <u>220</u> ft.
	Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... <u>136</u> ft. below land surface measured on mo/day/yr. <u>4-20-07</u> Pump test data: Well water was..... ft. after..... hours pumping..... gpm Est. Yield. <u>32</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 <input checked="" type="checkbox"/> Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well <u>Stock</u> 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 <input checked="" type="checkbox"/> No

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped.....
<input checked="" type="checkbox"/> PVC	4 ABS	7 Fiberglass		Welded.....
Blank casing diameter <u>10</u> in. to <u>220</u> ft., Diameter..... in. to ft., Diameter..... in. to ft.				Threaded.....
Casing height above land surface..... <u>12</u> in., Weight lbs./ft.				Wall thickness or gauge No. <u>200 PSI</u>

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<input checked="" type="checkbox"/> 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	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	<input checked="" type="checkbox"/> Saw Cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From..... 200 ft. to 220 ft., From ft. to ft.
From..... ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From..... 25 ft. to 220 ft., From ft. to ft.
From..... ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 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 checked="" type="checkbox"/> 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? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	top soil	162	164	brown clay
2	34	brown clay	164	182	fine to medium sand
34	53	sandy brown clay	182	184	brown clay
53	78	gypsum	184	188	coarse sand, clean loose
78	102	coarse sand, small gravel, cemented sds	188	193	brown clay
102	120	brown clay	193	218	coarse sand, small gravel, loose
120	126	med. to coarse sand	218	220	yellow shale
126	150	med to coarse sand, cemented sand sds			black shale
150	159	fine to med sand, few clay streaks			
159	162	gray clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ... 4-20-07 ... 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) ... 5-21-07 ... under the business name of Midwest Well & Pump Inc by (signature) Victor Sukup

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.kdheks.gov/waterwell/index.html>.