

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No.

<b>1 LOCATION OF WATER WELL:</b> County: Rush		Fraction NE ¼ SW ¼ SW ¼ SE ¼	Section Number 20	Township No. T 18 S	Range Number R 20 <input type="checkbox"/> E <input checked="" type="checkbox"/> W																																																																		
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"/> . Kansas Highway 96, Alexander, KS			<b>Global Positioning System (GPS) information:</b> 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																																																																				
<b>2 WATER WELL OWNER:</b> Mid State Farms Coop RR#, Street Address, Box #: PO Box 195 City, State, ZIP Code : Rush Center, KS 67575																																																																							
<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> N W E S -----1 mile----- <table border="1" style="margin: 10px auto; width: 100px; height: 100px; text-align: center;"> <tr><td>NW</td><td>NE</td></tr> <tr><td>SW</td><td>SE</td></tr> </table>		NW	NE	SW	SE	<b>4 DEPTH OF COMPLETED WELL 42.5'</b> Depth(s) Groundwater Encountered (1) ~29' ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL NM' 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 Bore Hole Diameter .....in. to .....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 type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input checked="" type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well Observation 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																																	
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<b>5 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other ..... <b>CASING JOINTS:</b> <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 2' in. to 40' ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface -5.40 in., Weight ..... lbs./ft., Wall thickness or gauge No. Sch. 40 PVC <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <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) <b>SCREEN OR PERFORATION OPENINGS ARE:</b> <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) ..... <b>SCREEN-PERFORATED INTERVALS:</b> From 40' ft. to 42.5' ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. <b>GRAVEL PACK INTERVALS:</b> From 38' ft. to 42.5' ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.																																																																							
<b>6 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other ..... Grout Intervals: From 1' ft. to 38' 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 checked="" 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 type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Lust Site Direction from well ..... Distance from well .....																																																																							
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>6"</td> <td>Gravel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6"</td> <td>15'</td> <td>Clay, silty</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td>20</td> <td>Silt</td> <td></td> <td></td> <td></td> </tr> <tr> <td>20</td> <td>28</td> <td>Clay, silty</td> <td></td> <td></td> <td></td> </tr> <tr> <td>28</td> <td>29</td> <td>Clay, sandy</td> <td></td> <td></td> <td>ASOBW1</td> </tr> <tr> <td>29</td> <td>42.5'</td> <td>Sand gravel mix</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	6"	Gravel				6"	15'	Clay, silty				15	20	Silt				20	28	Clay, silty				28	29	Clay, sandy			ASOBW1	29	42.5'	Sand gravel mix																											
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<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> 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) 06/26/2009 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) 08/06/2009 under the business name of Coranco Great Plains, Inc. by (signature) <i>[Signature]</i>																																																																							
<b>INSTRUCTIONS:</b> 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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> .																																																																							