

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. 5

1 LOCATION OF WATER WELL: County: <u>Lane</u>	Fraction <u>NW¹/₄ NW¹/₄ NE¹/₄</u>	Section Number <u>24</u>	Township Number <u>T 18 S</u>	Range Number <u>R 29 E</u> (W)
Distance and direction from nearest town or city street address of well if located within city? <u>740 West Long St; Dighton Ks.</u>		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>38.48167</u> Longitude: <u>100.47567</u> Elevation: <u>2773.02</u> Datum: _____ Data Collection Method: <u>RLS</u>		
2 WATER WELL OWNER: <u>Chevron Env. Mgmt. Com.</u> RR#, St. Address, Box # : <u>P.O. Box 430</u> City, State, ZIP Code : <u>Bellaire, Tx 77401</u>				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center; width: 60px; height: 60px;"> <tr><td> </td><td> </td><td> </td></tr> <tr><td>--NW--</td><td>X</td><td>--NE--</td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td>--SW--</td><td> </td><td>--SE--</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> E S				--NW--	X	--NE--				--SW--		--SE--				4 DEPTH OF COMPLETED WELL <u>65'</u> ft. Depth(s) Groundwater Encountered (1) <u>53'</u> ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL <u>51.69</u> 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 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 Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes No X
--NW--	X	--NE--														
--SW--		--SE--														

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 X

Blank casing diameter 3.375 in. to 4.5 ft., Diameter..... in. to ft., Diameter..... in. to ft.
Casing height above land surface FLUSH Mt. in., Weight.....lbs./ft. Wall thickness or gauge No. Sch 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	5 Gauzed 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 65' ft. to 45' ft., From..... ft. to ft.
From..... ft. to ft., From..... ft. to ft.

GRAVEL PACK INTERVALS: From 65' ft. to 43' 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 cement**
Grout Intervals: From 43' ft. to 3' ft., From 2' ft. to 0' 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** Fuel 14 Abandoned water well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well

Direction from well? Northeast How many feet? 100'

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	ls Rx gravel Qtz sand base			
1	4.5	Dk brn clay, moist, firm, no odor.			
4.5	8	Med brn silty clay, moist, firm.			
8	15	lt-med brn snady silty clay, moist, firm, no odor, fine-med grained.			
15	33	Wht-lt pale gray clayey sand-sand clay w/caliche nodules, moist-dry.			
33	40	wht-lt pale gray sandy clay, dry, firm-hard			
40	47	wht-tan sandy clay w/caliche, dry-moist, hard			
47	53	same as above, soft, no odor, moist-wet @ 53-65'			

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) 6-27-07 and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 732 This Water Well Record was completed on (mo/day/year) 8-8-07
under the business name of GB Environmental by (signature) James Beebe

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>.