

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Scott Fraction SE 1/4 SE 1/4 NE 1/4 SE 1/4		Section Number 13	Township Number T 18 S	Range Number R 33 E/W																																																											
Distance and direction from nearest town or city street address of well if located within city? 101 N. Main, Scott City		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 38.486666 Longitude: 100.907161 Elevation: TOC 2975.49 Datum: WGS 84 Data Collection Method:																																																													
2 WATER WELL OWNER: Scott Coop RR#, St. Address, Box # : 1st and Antelope City, State, ZIP Code : Scott City, KS 67871		ORE per diller 7/2/14																																																													
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td colspan="2" style="text-align: center;">N</td></tr> <tr><td style="text-align: center;">--NW--</td><td style="text-align: center;">--NE--</td></tr> <tr><td style="text-align: center;">W</td><td style="text-align: center;">E</td></tr> <tr><td style="text-align: center;">--SW--</td><td style="text-align: center;">--SE--</td></tr> <tr><td colspan="2" style="text-align: center;">S</td></tr> </table> </div>	N		--NW--	--NE--	W	E	--SW--	--SE--	S		4 DEPTH OF COMPLETED WELL ..170.2..... ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 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) <input checked="" type="checkbox"/> 10 Monitoring well 1W-27 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"/>																																																				
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5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued..... Clamped..... 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded..... <input checked="" type="checkbox"/> 2 PVC 4 ABS 7 Fiberglass Threaded..... Blank casing diameter1"..... in. to 166.2 ft., Diameter. 1"..... in. to 168.2-170.2 ft., Diameter in. to ft. Casing height above land surface..... in., Weight.....lbs./ft. Wall thickness or gauge No. schedule 40 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> 3 Mill slot 0.010 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 166.2 ft. to 168.2 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 164.1 ft. to 170.2 ft., From ft. to ft. From ft. to ft., From ft. to ft.																																																															
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite 4 Other Grout Intervals: From 1'..... ft. to 164.1 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 below 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well Direction from well? How many feet?																																																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">FROM</th> <th style="width: 10%;">TO</th> <th style="width: 40%;">LITHOLOGIC LOG</th> <th style="width: 10%;">FROM</th> <th style="width: 10%;">TO</th> <th style="width: 20%;">PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>0.5</td> <td>cement</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.5</td> <td>20</td> <td>SILT</td> <td></td> <td></td> <td></td> </tr> <tr> <td>20</td> <td>36</td> <td>Silty CLAY</td> <td></td> <td></td> <td></td> </tr> <tr> <td>36</td> <td>58</td> <td>CLAY with caliche</td> <td></td> <td></td> <td></td> </tr> <tr> <td>58</td> <td>71</td> <td>SAND with clay and caliche</td> <td></td> <td></td> <td></td> </tr> <tr> <td>71</td> <td>111</td> <td>CLAY and caliche</td> <td></td> <td></td> <td></td> </tr> <tr> <td>111</td> <td>126</td> <td>CLAY, caliche and sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>126</td> <td>143</td> <td>CALICHE and clay with sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>143</td> <td>170.2</td> <td>SAND with clay and caliche and gravel</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	0.5	cement				0.5	20	SILT				20	36	Silty CLAY				36	58	CLAY with caliche				58	71	SAND with clay and caliche				71	111	CLAY and caliche				111	126	CLAY, caliche and sand				126	143	CALICHE and clay with sand				143	170.2	SAND with clay and caliche and gravel			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7/2/14 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) 8-21-14 under the business name of Woofter Pump & Well by (signature) <i>Jay Calvo</i>																																																															
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 .																																																															