

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Barton		Fraction SE ¼ SE ¼ SE ¼ SW ¼	Section Number 31	Township No. T 19 S	Range Number R 11 ☐ E ☒ W				
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐ 4S Service-524 South Main-Ellinwood, KS 67526			Global Positioning System (GPS) information: Latitude: .38.34804..... (in decimal degrees) Longitude: 98.58157..... (in decimal degrees) Elevation: .1786.57..... Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27 Collection Method: ☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☒ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m						
2 WATER WELL OWNER: KDHE-BER RR#, Street Address, Box #: 1000 SW JACKSON STREET City, State, ZIP Code : TOPEKA, KS 66612-1367									
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N W <table border="1" style="border-collapse: collapse; text-align: center;"> <tr> <td style="padding: 5px;">NW</td> <td style="padding: 5px;">NE</td> </tr> <tr> <td style="padding: 5px;">SW</td> <td style="padding: 5px;">SE</td> </tr> </table> E S S -----1 mile-----		NW	NE	SW	SE	4 DEPTH OF COMPLETED WELL 26..... ft. Depth(s) Groundwater Encountered (1).~15'..... 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 Bore Hole Diameterin. toft., andin. toft. WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☒ Injection well ☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below) ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well ASW10 Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No If yes, mo/day/yr sample was submitted..... Water well disinfected? ☐ Yes ☒ No			
NW	NE								
SW	SE								
5 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other..... CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☒ Threaded Casing diameter .2..... in. to .23.5'..... ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface..-5.52..... in., Weightlbs./ft., Wall thickness or gauge No. Sch. 40 PVC..... TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☒ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous slot ☒ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify) SCREEN-PERFORATED INTERVALS: From..23.5'..... ft. to ..26'..... ft., From ft. to ft. From..... ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From..22..... ft. to ..26'..... ft., From ft. to ft. From..... ft. to ft., From ft. to ft.									
6 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other..... Grout Intervals: From .1..... ft. to .21..... ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: ☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☒ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well ☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well Lust Site Direction from well Distance from well									
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS				
0	1	Gravel							
1	14	Clay, silty							
14	26	Sand, fine to coarse							
					ASW10				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) .09/11/2012.... 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) 01/22/2013..... under the business name of Coranco Great Plains, Inc. by (signature)									
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 .									