

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Reno		SE ¼ SE ¼ NE ¼		22		T 23 S		R 06 W	
Distance and direction from nearest town or city street address of well if located within city? West side of Valley Pride Road, between 6th Avenue & Railroad tracks to the north									
2 WATER WELL OWNER:		Reno County							
RR#, St. Address, Box # :		206 W. 1st Street							
City, State, ZIP Code :		Hutchinson, Kansas 67501							
		Board of Agriculture, Division of Water Resources Application Number:							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 43 ft. ELEVATION:							
		Depth(s) Groundwater Encountered 1 18 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 Diameter 8.5 in. to 45 ft. and _____ in. to _____ ft.							
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
		1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
		2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well Air Sparge							
		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							
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____									
7 Fiberglass _____ Threaded Flush									
Blank casing diameter 2 in. to 41 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface Flushmount in., weight 0.703 lbs./ft. Wall thickness or gauge No. Sch. 40									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) _____									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes									
7 Torch cut 10 Other (specify) _____									
SCREEN-PERFORATED INTERVALS: From 41 39.5 43 ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 40 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 Bentonite Grout									
Grout Intervals From 1 ft. to 38 ft. From 38 ft. to 40 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 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____									
13 Insecticide storage _____									
Direction from well? _____ How many feet? _____									
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS			
0	4.5		Lean Clay, red brown						
4.5	6.5		Lean Clay, dark brown						
6.5	12.5		Lean Clay, red brown						
12.5	17		Sand, rusty brown, fine to med. grained						
17	18		Sand, fine to med. grained, brown						
18	33		Sand, fine to coarse grained						
33	43		Gravel, med to coarse						
43	45		Silty Sand						
							Don Taylor was contacted on 12-07-04 regarding this late form		
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/yr) 12-15-02 and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 12-10-04									
under the business name of Geotechnical Services, Inc. by (signature) _____									
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									

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