

**WATER WELL RECORD**

Form WWC-5

Division of Water Resources; App. No.  

<b>1 LOCATION OF WATER WELL:</b> County: Kingman	Fraction Se $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 8	Township Number T 27 S	Range Number R 9 E/W <input checked="" type="checkbox"/>
Distance and direction from nearest town or city street address of well if located within city?		<b>Global Positioning Systems (decimal degrees, min. of 4 digits)</b> Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		

**2 WATER WELL OWNER:** Cairo Coop Equity Exchange  
 RR#, St. Address, Box # 100 Cairo Main, Box 45  
 City, State, ZIP Code Cunningham, KS 67035

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;"> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px;">N</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;">E</td> </tr> <tr> <td style="width: 20px;">W</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;">E</td> </tr> <tr> <td style="width: 20px;">S</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;">E</td> </tr> <tr> <td style="width: 20px;">N</td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;">E</td> </tr> </table> </div>	N			E	W			E	S			E	N			E	<b>4 DEPTH OF COMPLETED WELL</b> 69 ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL 53.9 ft. below land surface measured on mo/day/yr 12/10/08 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 I 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"/> Monitoring well 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"/>
N			E														
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N			E														

**5 TYPE OF CASING USED:**

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued _____ Clamped _____
<input checked="" type="checkbox"/> 2 PVC	4 ABS	7 Fiberglass		Welded _____ Threaded <input checked="" type="checkbox"/> Yes

Blank casing diameter 2 in. to 51.5 ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface 2.5 ft. in., Weight SCH 40 lbs./ft. Wall thickness or gauge No. \_\_\_\_\_

**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	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 69 ft. to 49 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**GRAVEL PACK INTERVALS:** From 69 ft. to 47 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 \_\_\_\_\_

Grout Intervals: From 47 ft. to 0 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	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	<input checked="" type="checkbox"/> 12 Fertilizer Storage	15 Oil well/gas well	

Direction from well? IMMEDIATE VICINITY How many feet? IMMEDIATE VICINITY

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0'	2.5'	Silty clay, dark red brown, firm, moist			
2.5'	4.5'	Silty clay, red brown, firm, damp, slit sandy			
4.5'	11'	Sand, light red, very silty, fine grain, damp			
11'	19.5'	Sand, fine-medium trace course clayey, damp			
19.5'	25'	Sandy clay, red brown, medium-course grain, firm, damp, caliche			
25'	42'	Silty clay, red brown, firm, damp, trace caliche			
42'	46'	Sand, very clayey, red medium-course grain, damp			
46'	60'	Sand, slit clayey, red medium-course grain, moist			
60'	69'	Sand, medium-course, fine grain, saturated			MW-17

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 12/11/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 12/12/08 under the business name of Pratt Well Service, Inc. by (signature) *Steven Hill*

**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, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612- 1 367. 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>.