

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:	Fraction County: Grant NW ¼ NW ¼ SW ¼	Section Number 36	Township Number T 28 S	Range Number R 37 E W
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Distance and direction from nearest town or city street address of well if located within city? **.5 East of Ulysses** **Global Positioning System** (decimal degrees, min. of 4 digits)
 Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: Rafael Anguiano
 RR#, St. Address, Box # : 1557 Ponderosa Lane
 City, State, ZIP Code : Ulysses, Ks 67880

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL 480 ft.
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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 Feed lot 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 **x** No _____

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	Eagle-Loc _____	Welded _____
				Threaded _____

Blank casing diameter **5** in. to **480** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **18** in., Weight _____ lbs./ft. Wall thickness or gauge No. **SDR 17**

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 Guaze 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 **380** ft. to **400** ft. From **420** ft. to **440** ft.
 From **460** ft. to **480** ft. From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From **30** ft. to **480** 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 **5** ft. to **30** 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	12 Fertilizer storage	15 Oil well/ gas well	

Direction from well? _____ How many feet? **None observed**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	12	Top soil & br clay	420	427	Blue shale
12	16	sand	427	430	Rock very hard
16	213	Br, grey, & yellow clay	430	440	Blue shale & sandstone
213	260	Fine to med sand & clay streaks	440	480	Sandstone & shale stks
260	280	Sandy clay			
280	286	Iron priote & caliche			
286	330	Brown & black clay			
330	332	rock			
332	416	Blue clay & sandstone stks.			
416	420	sandstone			

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) **11/04/09** and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. **473**. This Water Well Record was completed on (mo/day/year) **11/10/09**
 under the business name of **Tyler Water Well, Inc.** by (signature) *[Signature]*

INSTRUCTIONS: Please fill in blanks 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>.