

## WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

<b>1 LOCATION OF WATER WELL:</b> County: Barber		Fraction NW $\frac{1}{4}$ SE $\frac{1}{4}$ NW $\frac{1}{4}$		Section Number 5	Township Number T 30 S	Range Number R 11 <u>W</u>																								
Distance and direction from nearest town or city street address of well if located within city? West River Rd. and Sunflower Dr.				Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____																										
<b>2 WATER WELL OWNER:</b> Farmers Co-op Equity Co. FCE RR#, St. Address, Box # Box 40 City, State, ZIP Code Isabel, KS 67065																														
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N <table border="1" style="width:100%; text-align: center; border-collapse: collapse;"> <tr><td>W</td><td> </td><td> </td><td>E</td></tr> <tr><td> </td><td>--NW--</td><td>--NE--</td><td> </td></tr> <tr><td> </td><td>X</td><td> </td><td> </td></tr> <tr><td> </td><td>--SW--</td><td>--SE--</td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td>S</td><td> </td><td> </td><td> </td></tr> </table>		W			E		--NW--	--NE--			X				--SW--	--SE--						S				<b>4 DEPTH OF COMPLETED WELL</b> 77 ft.  Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL 66.00 ft. below land surface measured on mo/day/yr 10-13-06 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) <u>10</u> Monitoring well  Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr _____ Sample was submitted _____ Water well disinfected? Yes _____ No <u>X</u>				
W			E																											
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<b>5 TYPE OF CASING USED:</b> 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) _____ <u>2</u> VC 4 ABS 7 Fiberglass _____ Blank casing diameter <u>2</u> in. to <u>67</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface <u>32</u> in., Weight _____ lbs./ft. Wall thickness or guage No. <u>SCH40</u> <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> 1 Steel 3 Stainless Steel 5 Fiberglass <u>7</u> 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) <b>SCREEN OR PERFORATION OPENINGS ARE:</b> 1 Continuous slot <u>3</u> 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) _____ <b>SCREEN-PERFORATED INTERVALS:</b> From <u>67</u> ft. to <u>77</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft. <b>GRAVEL PACK INTERVALS:</b> From <u>77</u> ft. to <u>65</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.																														
<b>6 GROUT MATERIAL:</b> 1 Neat cement 2 Cement grout <u>3</u> Bentonite 4 Other _____ Grout Intervals: From <u>65</u> ft. to <u>27</u> ft., From <u>27</u> ft. to <u>2</u> 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 <u>12</u> Fertilizer Storage 15 Oil well/gas well Direction from well? West How many feet? <u>350</u>																														
<b>FROM TO LITHOLOGIC LOG</b>			<b>FROM TO PLUGGING INTERVALS</b>																											
0	2	Fill	77	65	10/20 Sand																									
2	15	Tan clay	65	27	3/8 Bentonite chips																									
15	22	Light grey clay	27	2	Bentonite Grout																									
22	35	Sand and gravel	2	0	Cement																									
35	52	White clay																												
52	61	Tan clay with pebbles																												
61	70	Sand with tan clay			MW-05																									
70	75	Aggregate sand with pebbles																												
75	80	Brown clay																												
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <u>1</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>10-12-06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>665</u> This Water Well Record was completed on (mo/day/year) <u>10-20-06</u> under the business name of Pratt Well Environmental by (signature) <u>Jason E. Ehl</u> 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 <a href="http://www.kdhe.state.ks.us/geo/waterwells">http://www.kdhe.state.ks.us/geo/waterwells</a> .																														