

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Grant Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 215 East Road 20 Ulysses, Kansas		Fraction NW ¼ NW ¼ ¼		Section Number 10		Township No. T 30 S		Range Number R 37 <input type="checkbox"/> E <input checked="" type="checkbox"/> W					
2 WATER WELL OWNER: Pioneer Natural Resources, USA RR#, Street Address, Box #: P.O. Box 2788 City, State, ZIP Code : Amarillo, Texas 79105		Global Positioning System (GPS) information: Latitude: N37.458795..... (in decimal degrees) Longitude: W101.358155..... (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: Handv GPS.....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input checked="" type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m											
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N <div style="display: flex; align-items: center; justify-content: center;"> <div style="margin-right: 10px;">W</div> <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> <div style="margin-left: 10px;">E</div> </div> <div style="text-align: center; margin-top: 5px;">S</div> <div style="text-align: center; margin-top: 5px;"> -----1 mile----- </div>		NW	NE	SW	SE	4 DEPTH OF COMPLETED WELL 110 ft. <i>SVE-5</i> 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 Bore Hole Diameter 8 3/4.....in. to 112.....ft., andin. toft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input checked="" type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well <i>Soil Vapor Extr.</i> Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
NW	NE												
SW	SE												
5 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 2..... in. to 25..... ft., Diameter 2..... in. to 70..... ft., Diameter in. to ft. Casing height above land surface 12..... in., Weightlbs./ft., Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input checked="" type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From 25..... ft. to 65..... ft., From 70..... ft. to 110..... ft. From..... ft. to ft., From..... ft. to ft. GRAVEL PACK INTERVALS: From 24..... ft. to 65..... ft., From 69..... ft. to 112..... ft. From..... ft. to ft., From..... ft. to ft.													
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From 3..... ft. to 24..... ft., From 65..... ft. to 69..... ft., From..... ft. to ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input checked="" type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Direction from well Distance from well													
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS								
0	2	Brown Clay	62	67	Pink Silt								
2	9	Brown Silt	67	74	Reddish Yellow Clay								
9	14	Gray Silt	74	81	Red Silty Clay								
14	18	Brown Silt	81	86	Pink Clay								
18	27	Gray Clay	86	89	Pink Silt								
27	36	Brown Clay	89	99	Reddish Yellow Clay								
36	43	Gray Silt	99	103	Red Silty Clay								
43	51	Brown Clayey Silt	103	112	Yellowish Red Clay								
51	59	Pink Clay											
59	62	Gray Silt											
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 02/13/2012.... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 763..... This Water Well Record was completed on (mo/day/year) 03/08/2012..... under the business name of Peterson Drilling and Testing, Inc..... by (signature) <i>[Signature]</i>													
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT 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 785-296-5524. 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 .													