

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: <u>Phillips</u>	Fraction <u>SW 1/4 SW 1/4 SE 1/4 NW 1/4</u>	Section Number <u>27</u>	Township No. <u>T 3 S</u>	Range Number <u>R 16</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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"/> <u>412' East of 410 N. Main St. Agra, KS</u>		Global Positioning System (GPS) information: Latitude: <u>39.1172</u> (in decimal degrees) Longitude: <u>99.764</u> (in decimal degrees) Elevation: <u>1857</u> Datum: <input checked="" type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27		
2 WATER WELL OWNER: <u>CCC/USDA/FSA (Steve Gilmore)</u> RR#, Street Address, Box #: <u>Stop 0513 Rm 4717-S Independence Ave SW</u> City, State, ZIP Code : <u>Washington, DC 20250-0513</u>		Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: <u>MobleMaper CE</u>) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input checked="" type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		

3 LOCATE WELL WITH AN "X" IN SECTION BOX:

N

NW	NE	SE	SW
W	X	E	S

S

|-----| milc-----|

4 DEPTH OF COMPLETED WELL 30 ft.

Depth(s) Groundwater Encountered (1) None ft. (2) _____ ft. (3) _____ ft.

WELL'S STATIC WATER LEVEL N/A ft. below land surface measured on mo/day/yr. N/A

Pump test data: Well water was N/A ft. after N/A hours pumping N/A gpm

EST. YIELD N/A gpm. Well water was N/A ft. after N/A hours pumping N/A gpm

Bore Hole Diameter 4.25 in. to 30 ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS: Public water supply Geothermal Injection well
 Domestic Feedlot Oil field water supply Dewatering Other (Specify below)
 Irrigation Industrial Domestic-lawn & garden Monitoring well Soil Gas SandPnt.....

Was a chemical/bacteriological sample submitted to Department? Yes No
 If yes, mo/day/yr sample was submitted N/A

Water well disinfected? Yes No

5 TYPE OF CASING USED: Steel PVC Other _____

CASING JOINTS: Glued Clamped Welded Threaded

Casing diameter .1 in. to .29 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.

Casing height above land surface 0 in., Weight 0.333 lbs./ft., Wall thickness or gauge No. 0.133

TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel PVC Other (Specify) _____
 Brass Galvanized Steel None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 29 ft. to 30 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 27 ft. to 30 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Intervals: From Chips 27 ft. to 25 ft., From Cmt 25 ft. to Surface ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:
 Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)
 Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well Grain Elevator

Direction from well South Distance from well 200'

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	12	Silty Clay-Dark Brown			
12	30	Silty Clay-Tight-Light Brown-Moist			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 07/01/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 680. This Water Well Record was completed on (mo/day/year) 07/10/09 under the business name of Delta Environmental by (signature) [Signature]

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 785-296-5522. 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>.

Agra KS
Network for LDBs, SGs, GWs
5/11/09

