

WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number																																																																																										
County: <u>Thomas</u>		<u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>32</u>	<u>T</u> <u>7</u> <u>S</u>	<u>R</u> <u>33</u> <u>EW</u>																																																																																										
Distance and direction from nearest town or city street address of well if located within city? <u>345 Convesse Ave., Colby, KS</u>																																																																																															
2 WATER WELL OWNER: <u>Ace Service Station</u>																																																																																															
RR#, St. Address, Box # : <u>345 Convesse Ave.</u>																																																																																															
City, State, ZIP Code : <u>Colby, KS 67701</u>																																																																																															
Board of Agriculture, Division of Water Resources MW #4 Application Number:																																																																																															
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>120</u> ft. ELEVATION: _____																																																																																													
<div style="text-align: center;">N 1 Mile W E S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table> <div style="text-align: center;">X</div>		NW	NE	SW	SE	Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.																																																																																									
		NW	NE																																																																																												
		SW	SE																																																																																												
		WELL'S STATIC WATER LEVEL <u>94.36</u> 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 <u>8</u> in. to <u>120</u> ft. and _____ in. to _____ ft.																																																																																													
		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 Lawn and garden only 10 Monitoring well _____																																																																																													
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> _____ If yes, mo/day/yr sample was sub- mitted _____																																																																																													
		Water Well Disinfected? Yes _____ No <u>X</u> _____																																																																																													
5 TYPE OF BLANK CASING USED:																																																																																															
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____																																																																																															
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____																																																																																															
7 Fiberglass _____ Threaded <u>X</u> _____																																																																																															
Blank casing diameter <u>4</u> in. to <u>100</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.																																																																																															
Casing height above land surface <u>0</u> in. weight <u>2,071</u> lbs./ft. Wall thickness or gauge No. <u>237</u>																																																																																															
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																																																															
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement																																																																																															
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____																																																																																															
9 ABS 12 None used (open hole)																																																																																															
SCREEN OR PERFORATION OPENINGS ARE:																																																																																															
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)																																																																																															
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes																																																																																															
7 Torch cut 10 Other (specify) _____																																																																																															
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																																																															
From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																																																															
GRAVEL PACK INTERVALS: From _____ ft. to _____ 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 _____ ft. to _____ 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 14 Abandoned water well																																																																																															
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well																																																																																															
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)																																																																																															
13 Insecticide storage Contaminated Site _____																																																																																															
Direction from well? _____ How many feet? _____																																																																																															
<table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th><th>FROM</th><th>TO</th><th>PLUGGING INTERVALS</th></tr></thead><tbody><tr><td>0</td><td>2</td><td>Surface</td><td>97</td><td>99</td><td>Cemented Sand w/Clay & Caliche</td></tr><tr><td>2</td><td>11</td><td>Loess</td><td>99</td><td>117</td><td>Sandy Clay & Caliche</td></tr><tr><td>11</td><td>37</td><td>Clay & Caliche</td><td>117</td><td>120</td><td>Med. Sand & Gravel w/Clay Lyrs.</td></tr><tr><td>37</td><td>40</td><td>Med. Sand w/Clay Strks w/Gravel & Rocks</td><td></td><td></td><td></td></tr><tr><td>40</td><td>49</td><td>Sandy Clay w/Some Sand</td><td></td><td></td><td></td></tr><tr><td>49</td><td>53</td><td>Caliche & Cemented Sand w/Clay</td><td></td><td></td><td></td></tr><tr><td>53</td><td>60</td><td>Fine Sand w/Clay</td><td></td><td></td><td></td></tr><tr><td>60</td><td>67</td><td>Cemented Sand w/fine Sand & Clay St.</td><td></td><td></td><td></td></tr><tr><td>67</td><td>78</td><td>Sandy Clay & Caliche</td><td></td><td></td><td></td></tr><tr><td>78</td><td>83</td><td>Med. Sand & Gravel w/Clay Layers</td><td></td><td></td><td></td></tr><tr><td>83</td><td>85</td><td>Sandy Clay w/Caliche</td><td></td><td></td><td></td></tr><tr><td>85</td><td>88</td><td>Cemented Sand w/Clay & Caliche</td><td></td><td></td><td></td></tr><tr><td>88</td><td>94</td><td>Med. Sand w/Clay Layers</td><td></td><td></td><td></td></tr><tr><td>94</td><td>97</td><td>Sandy Clay & Caliche</td><td></td><td></td><td></td></tr></tbody></table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	2	Surface	97	99	Cemented Sand w/Clay & Caliche	2	11	Loess	99	117	Sandy Clay & Caliche	11	37	Clay & Caliche	117	120	Med. Sand & Gravel w/Clay Lyrs.	37	40	Med. Sand w/Clay Strks w/Gravel & Rocks				40	49	Sandy Clay w/Some Sand				49	53	Caliche & Cemented Sand w/Clay				53	60	Fine Sand w/Clay				60	67	Cemented Sand w/fine Sand & Clay St.				67	78	Sandy Clay & Caliche				78	83	Med. Sand & Gravel w/Clay Layers				83	85	Sandy Clay w/Caliche				85	88	Cemented Sand w/Clay & Caliche				88	94	Med. Sand w/Clay Layers				94	97	Sandy Clay & Caliche			
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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) <u>11-4-97</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>554</u> This Water Well Record was completed on (mo/day/yr) <u>11-14-97</u> under the business name of <u>Woofter Pump & Well, Inc.</u> by (signature) <u>[Signature]</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																															