

WATER WELL RECORD (WWC-5)

KOLAR DOC ID _____ WELL ID _____

LOCATION OF WATER WELL

Latitude		Longitude		Section		Township		Range		E W	Fraction	¼	¼	¼
Datum		Elevation		County										

WATER WELL OWNER

Name	
Business	
Address	
Well location at owner's address	

WELL WATER USE

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WELL INFORMATION

Depth of well: _____ ft.
Dry well
Static water level in well: _____ ft. measured below land surface on (mm/dd/yy): _____
measured above land surface on (mm/dd/yy): _____

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.: _____
KDHE / EPA Project Code: _____
Site Name: _____
KDHE UIC Class V Form Completed: Yes No
County Permit: Yes No Permit ID: _____
Lease Name & Well #: _____
of boreholes: _____ # of dewatering wells: _____

CASING

Type of blank casing used: _____
Casing type details: _____
Blank casing diameter: _____ inches
Was casing removed? Yes No
Top of casing is currently _____ feet _____ ground
Reason required if top of casing is now less than 5 feet below ground surface for a hand dug well or less than 3 feet below ground surface for all other types of wells.

GROUT & PLUGGING MATERIALS

Grout or Plugging interval (ft.)		Material	Description
From	To		

COMMENTS

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CONTRACTOR'S OR LANDOWNERS CERTIFICATION

<p>This water well was plugged pursuant to the stated water well contractor's license and was completed on _____. I certify that this record is true to the best of my knowledge and belief. This water well record was completed on _____ under the business name of _____, Kansas Water Well Contractor's License No. _____ under the authority of the designated person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the designated person at its submittal _____.</p>
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Send one copy to WATER WELL OWNER and retain one for your records.

1 LOCATION OF WATER WELL: Fraction NE 1/4 NE 1/4 SW 1/4 Section Number 2 Township Number T 35 S Range Number R 25 E EW

Distance and direction from nearest town or city street address of well if located within city? S ME of Both Springs

2 WATER WELL OWNER: Bill Jackson Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: Rt. 2, Box 539
City, State, ZIP Code: Galena, Kansas 66739 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [Diagram of section box with X in SW]
4 DEPTH OF COMPLETED WELL: 120 ft. ELEVATION:
Depth(s) Groundwater Encountered: 1. 100 ft. 2. ft. 3. ft.
WELL'S STATIC WATER LEVEL: 60 ft. below land surface measured on mo/day/yr 10/5/95
Pump test data: Well water was ft. after hours pumping gpm
Est. Yield .25 gpm: Well water was ft. after hours pumping gpm
Bore Hole Diameter 8 5/8 in. to 63 ft., and 6 1/8 in. to 120 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 X; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded X
2 PVC 4 ABS 7 Fiberglass Threaded
Blank casing diameter 6 1/4 in. to 63 ft., Dia. in. to ft., Dia. in. to ft.
Casing height above land surface 12 in., weight 13 lbs./ft. Wall thickness or gauge No.
TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
X X X X X 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
SCREEN-PERFORATED INTERVALS: 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.

6 GROUT MATERIAL: 1 Neat cement X 2 Cement grout 3 Bentonite 4 Other
Grout intervals: From 0 ft. to 63 ft., From ft. to ft., From ft. to ft.
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage
Direction from well? East How many feet? 100

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows: 0-30 Overburden, 30-90 Limestone, 90-95 White flint, 95-120 Limestone.

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) October 5, 1995 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 321 This Water Well Record was completed on (mo/day/yr) October 12, 1995 under the business name of Neosho Drilling Company by (signature) John Sell

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.

OFFICE USE ONLY T R E W SEC. 1/4 1/4 1/4