# WATER WELL RECORD (WWC-5)

Constructed

KOLAR DOC ID 1676290 WELL ID 1

✓ Original Record ☐ Correction ☐ Change in Well Use

## LOCATION OF WATER WELL

| Latitude | 39.1726 | Longitude | -94.94494 | Section | 15 | Township | 10 | Range | 22 ✓E ☐W | Fraction | SW ¼ SW ¼ SE ¼ |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Datum | NAD27 | Elevation | 977 | County | Leavenworth | | | | | | |

## WATER WELL OWNER

| | |
|---|---|
| Name | Karen O'Connor |
| Business | |
| Address | 15782 Hollingsworth Rd<br>Basehor KS 66007 |
| Well location<br>✓ at owner's address | 15782 Hollingsworth Rd<br>Basehor,KS 66007 |

## WELL WATER USE

Domestic Household

## COMPLETION

Depth of completed well: 76 ft.

Depth(s) groundwater encountered:

(1) 55 ft.; (2) ____ ft.;

(3) ____ ft.; (4) ☐ dry well

Static water level in well: 35 ft.

✓ measured below land surface on (mm/dd/yy): 12/10/2022

☐ measured above land surface on (mm/dd/yy): ____

Estimated yield: 15 gpm

Water level was: 60 ft. after .5 hours pumping 10 gpm

Pump installed? ✓ Yes ☐ No

Water well disinfected? ✓ Yes ☐ No

Date disinfected (mm/dd/yy): 12/10/2022

Aquifer, if known:

## NEAREST SOURCE OF POTENTIAL CONTAMINATION

Source: ____

Distance from well: ____ Direction from well: ____

Source description: ____

Source: ____

Distance from well: ____ Direction from well: ____

Source description: ____

✓ No potential source of contamination within 100 feet.

## 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: ____

## CONSTRUCTION

Borehole interval: from 0 to 76 ft.; from ____ to ____ ft.

Borehole diameter: 9 in.; ____ in.

Casing height above land surface: 24 in.

If casing height is less than 12 in. has a variance been approved?* ☐ Yes ✓ No

*variance not required for monitoring or environmental remediation wells

Casing type: ThermalPlastic

Blank casing interval: 0 ft. to 76 ft.

Blank casing diameter: 5 in.

Casing joints: Glued

Weight: 40 lbs/ft.

Wall thickness or gauge no.: 40

Blank casing interval: ____ ft. to ____ ft.

Blank casing diameter: ____ in.

Casing joints: ____

Weight: ____ lbs/ft.

Wall thickness or gauge no.: ____

Grout interval: 0 ft. to 45 ft.

Grout material: Bentonite

Grout interval: ____ ft. to ____ ft.

Grout material: ____

Screen / perforation material: PVC

Screen / perforation openings: Mill slot

Screen / perforation intervals:

From 56 ft. to 76 ft.

Slot size .1 unit inches

From ____ ft. to ____ ft.

Slot size ____ unit ____

Gravel pack intervals:

Gravel pack not used: ☐ Gravel size .5 in

From 45 ft. to 76 ft.

Gravel pack not used: ☐ Gravel size ____ in

From ____ ft. to ____ ft.

## LITHOLOGIC LOG

| FROM | TO | LITHOLOGY INTERVALS |
|---|---|---|
| 0 | 1 | topsoil,medium,silty,dark,blackish,black,dry,firm,not cemented,no staining |
| 1 | 3 | clay,fine to medium,clayey,light,tannish,tan,dry,loose,not cemented,no staining |
| 3 | 12 | clay,coarse,clayey,light,tannish,tan,slighty moist,soft,not cemented,no staining |
| 12 | 52 | sand,fine,sandy,very light,tannish,tan,moist,loose,not cemented,no staining |
| 52 | 76 | sand & gravel,coarse,gravelly,light,tannish,tan,saturated,soft,not cemented,no staining |
| | | |

## COMMENTS

## CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed ✓ reconstructed ☐ pursuant to the stated water well contractor's license and was completed on 12/10/2022. I certify that this record is true to the best of my knowledge and belief. This water well record was completed on 12/10/2022 under the business name of Digger Jim, Kansas Water Well Contractor's License No. 899 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: James Manderscheid.

Send one copy to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well.

**KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT**

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367

(785) 296-3565 | K.S.A. 82a-1212 | v2022c