

PCmw-55

WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

[Empty box for application number]

1 LOCATION OF WATER WELL: County: Pottawatomie	Fraction ¼ NW ¼ NW ¼ NE ¼	Section Number 9	Township No. T 10 S	Range Number R 10 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here .
Lincoln St. & Ash St. between 4th & 5th St., Wamego, Ks.

Global Positioning System (GPS) information:
Latitude: .39.20201..... (in decimal degrees)
Longitude: -96.303664..... (in decimal degrees)
Elevation:
Datum: WGS 84, NAD 83, NAD 27

2 WATER WELL OWNER: KDHE / BER
RR#, Street Address, Box #: 1000 SW Jackson St. Suite 410
City, State, ZIP Code : Topeka, Ks. 66612-1367

Collection Method:
 GPS unit (Make/Model:)
 Digital Map/Photo, Topographic Map, Land Survey
Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m

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

		X	
-- NW --		-- NE --	
-- SW --		-- SE --	

W E

S
1 mile

4 DEPTH OF COMPLETED WELL 43..... ft.

Depth(s) Groundwater Encountered (1) 35.6..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL 33.0..... ft. below land surface measured on mo/day/yr. 7/31/2013.....

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 8.25..... in. to..... 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

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

Water well disinfected? Yes No

5 TYPE OF CASING USED: Steel PVC Other.....

CASING JOINTS: Glued Clamped Welded Threaded

Casing diameter 2..... in. to 33..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
Casing height above land surface 0..... in., Weight..... lbs./ft., Wall thickness or gauge No. sch 40

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 33..... ft. to 43..... ft., From..... ft. to..... ft.
From..... ft. to..... ft., From..... ft. to..... ft.

GRAVEL PACK INTERVALS: From 30..... ft. to 43..... 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 0..... ft. to 30..... ft., From..... ft. to..... 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

Direction from well..... Distance from well.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	7	silty clay (cl), dark brown, moist, soft	29	35	silty sand (sm), light olive brown, saturated, petroleum odor
7	11	clay (ch), dark brown, dry to moist stiff to soft	35	43	well graded sand (sw), brown, wet petroleum odor
11	13	silty clay (cl), brown, moist soft to stiff			
13	25	clay (ch), light olive brown, moist stiff			
25	29	silty clay (ch), olive gray brown, soft petroleum odor			

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) 7/19/2013..... and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 604..... This Water Well Record was completed on (mo/day/year) 8/26/13.....
under the business name of Environmental Priority Service, Inc. by (signature) P.A.M.T.

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy 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>