

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Wabunsee Co.</u>		<u>SW 1/4 NE 1/4 SE 1/4</u>	<u>35</u>	<u>T 10 S</u>	<u>R 11 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>From Park Co. North 4 1/2 miles then 6 1/2 miles East on Private Lane</u>			Global Positioning Systems (decimal degrees, min. of 4 digits)		
2 WATER WELL OWNER: <u>Mike Staly</u>			Latitude: _____		
RR#, St. Address, Box # : <u>Rte</u>			Longitude: _____		
City, State, ZIP Code : <u>St Marys, KS</u>			Elevation: _____		
			Datum: _____		
			Data Collection Method: _____		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>9.5</u> ft.			
<div style="text-align: center;"> </div>		Depth(s) Groundwater Encountered (1) <u>6.8</u> ft. (2) _____ ft. (3) _____ ft.			
		WELL'S STATIC WATER LEVEL <u>60</u> ft. below land surface measured on mo/day/yr. _____			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>20</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		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 Domestic (lawn & garden) 10 Monitoring well			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> ; If yes, mo/day/yr					
Sample was submitted _____ Water well disinfected? Yes <input checked="" type="checkbox"/> No _____					
5 TYPE OF CASING USED:					
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
2 PVC		4 ABS	7 Fiberglass		Welded _____
Blank casing diameter <u>5</u> in. to <u>7.5</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.					
Casing height above land surface <u>2</u> in., Weight <u>5ch 40</u> lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless Steel	5 Fiberglass	7 PVC	9 ABS
2 Brass		4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement
					11 Other (Specify) _____
					12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		5 Mill slot	5 Gauzed wrapped	7 Torch cut	9 Drilled holes
2 Louvered shutter		4 Key punched	6 Wire wrapped	8 Saw Cut	10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From <u>7.5</u> ft. to <u>9.5</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>2.2</u> ft. to <u>9.5</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____					
Grout Intervals: From <u>0</u> ft. to <u>2.2</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination: <u>None Close</u>					
1 Septic tank		4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage
2 Sewer lines		5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well
					16 Other (specify below)
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Top Soil	106	118	Limestone
1	22	Brown Clay	118	135	any clay shale
22	26	Limestone			
26	52	Brown Shale			
52	68	Gray Shale			
68	74	Limestone (Wash)			
74	78	tanish shale			
78	84	Brown Shale			
84	98	Limestone			
98	106	Brown Shale			
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>6/19/2008</u> and this record is true to the best of my knowledge and belief.					
Kansas Water Well Contractor's License No. <u>451</u> This Water Well Record was completed on (mo/day/year) <u>6/19/2008</u>					
under the business name of <u>Holden Hill Drilling</u> by (signature) <u>Craig H. Holden</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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html .					