

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

130

1 LOCATION OF WATER WELL:
 County: Wyandotte Fraction NE 1/4 SW 1/4 NE 1/4 Section Number 27 Township Number T 10 S Range Number R 25 E/W

Distance and direction from nearest town or city street address of well if located within city? _____

Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: 39 09 138
 Longitude: 094 36 583
 Elevation: 725
 Datum: _____
 Data Collection Method: GPS

2 WATER WELL OWNER: GM Corp. Fairfax Plant
 RR#, St. Address, Box # : 100 Kindelberger Rd.
 City, State, ZIP Code : Kansas City, KS.

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N			
--NW--			--NE--
		X	
--SW--			--SE--
S			

4 DEPTH OF COMPLETED WELL 35' ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL 28.85 ft. below land surface measured on mo/day/yr. 11/30/06
 Pump test data: Well water was.....ft. after..... hours pumping..... gpm
 Est. Yield.....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 X..... If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes..... No X.....

5 TYPE OF 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.....
2 PVC 4 ABS 7 Fiberglass..... Threaded X.....

Blank casing diameter 2.0" in. to 2.5" ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft.
 Casing height above land surface 2' in., weight.....lbs./ft. Wall thickness or gauge No. Sch 40

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify).....
 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5. Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify).....

SCREEN-PERFORATED INTERVALS: From..... 35' ft. to 25' ft., From..... ft. to..... ft.
 From..... ft. to..... ft., From..... ft. to..... ft.

GRAVEL PACK INTERVALS: From..... 35' ft. to 23' 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..... 23' ft. to 0' 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 13 Insecticide Storage 16 Other (specify below) FOUNDER GM PLANT
 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

Direction from well?..... How many feet?.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Brn clay w/few ls rx frag, moist, firm-soft, no odor.			
2	5	Blue gray silty clay, moist, soft, mod odor.			
5	8	Blue gray clayey siltm soft, moist, mod odor.			
8	11	Lt gray brn sand to silty sand, dry, soft, slight odor.			
11	26	Lt olive green silty sand to sand, soft, mod. odor.			
26	35	Moist to wet @26', gray fine-coarse sand, strong odor.			

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) 11/3/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ...732..... This Water Well Recorded was completed on (mo/day/year) 11/27/06..... Under the business name of JB Environmental by (signature) James Becker

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.