

WATER WELL RECORD Form WWC-5 KSA 82a-1212

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

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

3201 Fairfax Trafficway, Kansas City

2 WATER WELL OWNER: Kansas Dept of Health & Environ.
 RR#, St. Address, Box # : 1000 SW Jackson St., Suite 410 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Topeka, KS 66612 Application Number:

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

4 DEPTH OF COMPLETED WELL **30** ft. ELEVATION:

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

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

Pump test data: Well water was . . . **NA** . . . ft. after hours pumping gpm

Est. Yield . . . **NA** . . . gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter **8** . . . in. to **30** . . . ft., and in. to 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
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Monitoring well

12 Other (Specify below)

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 BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
2 PVC	4 ABS	7 Fiberglass	

CASING JOINTS: Glued Clamped
 Welded
 Threaded.

Blank casing diameter **2** in. to **10** ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface **31** in., weight lbs./ft. Wall thickness or gauge No. **Sch. 40**

TYPE OF SCREEN OR PERFORATION MATERIAL

1 Steel	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:

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

SCREEN-PERFORATED INTERVALS: From **10** ft. to **30** ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **8** ft. to **30** ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** **4 Other Concrete**

Grout Intervals: From **0** ft. to **2.5** ft., From **2.5** ft. to **8** 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	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Clay, Brownish Gray			
2	9	Silt, some vf sand, Yellowish Brown			
9	11	Clay, w/silt, Brownish Gray			
11	30	Sand, vf, tr. silt, Yellowish Brown			
					TMW-158-A, Abovegrade

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) **5/16/2013** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **527** This Water Well Record was completed on (mo/day/yr) **6/14/2013** under the business name of **GeoCore, Inc.** by (signature) *Daniel*

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.