

WATER WELL RECORD Form WWC-5

Original Record Correction Change in Well Use

Division of Water Resources App. No. _____

Well ID _____

1 LOCATION OF WATER WELL:
 County: CLAY Fraction S 1/4 S 1/4 SE 1/4 Section Number 19 Township Number T 10 N Range Number R 4 E W

2 WELL OWNER: Last Name: SHPOCK First: WALACE Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:
 Business Address: 1961 3rd Rd.
 Address: _____
 City: MINNIFIELD State: KS ZIP: 67487 4 miles south on Sunbeam Rd. Turn left on 3rd Rd.

3 LOCATE WELL WITH "X" IN SECTION BOX:
 N
 W E
 S
 1 mile

4 DEPTH OF COMPLETED WELL: 150 ft.
 Depth(s) Groundwater Encountered: 1) 115 ft.
 2) _____ ft. 3) _____ ft. or 4) Dry Well
WELL'S STATIC WATER LEVEL: 80 ft.
 below land surface, measured on (mo-day-yr) 7/5/2019
 above land surface, measured on (mo-day-yr) _____
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Well water was _____ ft. after _____ hours pumping _____ gpm
 Estimated Yield: 20 gpm
 Bore Hole Diameter: 9" in. to 150' ft. and _____ in. to _____ ft.

5 Latitude: N 39° 09.773 (decimal degrees)
Longitude: W 097° 01.435 (decimal degrees)
 Horizontal Datum: WGS 84 NAD 83 NAD 27
 Source for Latitude/Longitude:
 GPS (unit make/model) Garmin E-Trex 20 (WAAS enabled? Yes No)
 Land Survey Topographic Map
 Online Mapper: _____

6 Elevation: 4258' ft. Ground Level TOC
 Source: Land Survey GPS Topographic Map
 Other _____

7 WELL WATER TO BE USED AS:

1. <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	2. <input type="checkbox"/> Irrigation	3. <input type="checkbox"/> Feedlot	4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID _____	6. <input type="checkbox"/> Dewatering: how many wells? _____	7. <input type="checkbox"/> Aquifer Recharge: well ID _____	8. <input type="checkbox"/> Monitoring: well ID _____	9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease _____	11. Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical	12. Geothermal: how many bores? a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water	13. <input type="checkbox"/> Other (specify): _____
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Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: _____
 Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other _____ CASING JOINTS: Gued Clamped Welded Threaded
 Casing diameter 5" in. to 130 ft. Diameter _____ in. to _____ ft. Diameter _____ in. to _____ ft.
 Casing height above land surface 31 in. Weight 56.40 lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel Fiberglass PVC Other (Specify) _____
 Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 Continuous Slot Mill Slot Gauge Wrapped Torch Cut Drilled Holes Other (Specify) _____
 Louvered Slitter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 130 ft. to 150 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout intervals: From 5' ft. to 34' ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

Nearest source of possible contamination:
 Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage
 Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well
 Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well
 Other (Specify) _____

Direction from well? South East Distance from well? 130' ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	Top Soil	81	92	Brown shale
1	3	Brown shale	92	111	Limestone
3	12	Yellow shale	111	115	Yellow shale
12	17	Limestone	115	130	Limestone (water)
17	34	Yellow shale	130	138	Gray shale
34	37	Limestone	138	146	Limestone
37	61	Yellow shale	Notes: 146-150 Gray Oily shale		
61	74	Brown shale			
74	81	Limestone			

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-yr) 7/5/2019 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 451 This Water Well Record was completed on (mo-day-yr) 7/5/2019
 under the business name of Water Well Doctor _____