

**WATER WELL RECORD Form WWC-5**

Division of Water Resources App. No.

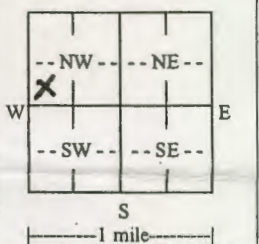
Well ID

Original Record  Correction  Change in Well Use

**1 LOCATION OF WATER WELL:** County: Clay Co. Fraction: SW 1/4 SW 1/4 NW 1/4 Section Number: 29 Township Number: T 10 S Range Number: R 4 E  W

**2 WELL OWNER:** Last Name: Barkholder First: Daniel 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: 2682 460th Rd. FROM WARRENVILLE GO WEST 1 MILE ON 82 TO  
 Address: MISSOURI 64453 SUNFLOWER RD 4 MILES SOUTH TO 3RD RD TO  
 City: GENTRY 1 MILE EAST TO BRANDI RD 1/2 MILE SOUTH

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



**4 DEPTH OF COMPLETED WELL:** 130 ft.  
 Depth(s) Groundwater Encountered: 1) 75 ft.  
 2) ..... ft. 3) ..... ft., or 4)  Dry Well  
**WELL'S STATIC WATER LEVEL:** ..... ft.  
 below land surface, measured on (mo-day-yr) 75'  
 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: 1.5 gpm  
 Bore Hole Diameter: 9" in. to 1.30 ft. and  
 ..... in. to ..... ft.

**5 Latitude:** N 39° 09.369 (decimal degrees)  
**Longitude:** W 097° 00.965 (decimal degrees)  
 Horizontal Datum:  WGS 84  NAD 83  NAD 27  
 Source for Latitude/Longitude: GARMIN TAPX 20  
 GPS (unit make/model: .....)  
 (WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper: .....  
**6 Elevation:** 1231' 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 checked="" 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 .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....	11. Test Hole: well ID .....	12. Geothermal: how many bores? .....	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:  Glued  Clamped  Welded  Threaded  
 Casing diameter 5 in. to 1.10 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface 2.1 in. Weight Sch 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  Gauze Wrapped  Torch Cut  Drilled Holes  Other (Specify) .....  
 Louvered Shutter  Key Punched  Wire Wrapped  Saw Cut  None (Open Hole)  
**SCREEN-PERFORATED INTERVALS:** From 1.10 ft. to 130 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From 45 ft. to 130 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....  
 Grout Intervals: From 5' ft. to 45' ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**Nearest source of possible contamination:** None Close  
 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) .....

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	Top Soil	111	130	Grey Shale
1	12	Brown Clay			
12	21	Limestone			
21	45	yellow shale			
45	48	Limestone			
48	75	Brown Shale			
75	92	Limestone (WALL)			
92	103	Brown Shale			
103	111	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) 2/27/2023 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) 3/8/2023 under the business name of Nathman Well Drilling Clay Co. MO

Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. Visit us at <http://www.kdheks.gov/waterwell/index.html> KSA 82a-1212 Revised 1/20/2015