

# 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: <b>WABAUNSEE</b>	Fraction <b>NW 1/4 SE 1/4 NE 1/4</b>	Section Number <b>25</b>	Township Number <b>T 10 S</b>	Range Number <b>R 9 E</b>
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2 WELL OWNER: Last Name: <b>BLUME</b> First: <b>BRIAN</b> Business: Address: <b>703 LINCOLN</b> Address: City: <b>WAMEGO</b> State: <b>KS</b> ZIP: <b>66547</b>	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: <input type="checkbox"/>
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3 LOCATE WELL WITH "X" IN SECTION BOX: N W E S -----1 mile-----	4 DEPTH OF COMPLETED WELL: <b>110</b> ft. Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: <b>36</b> ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <b>1/15/13</b> <input type="checkbox"/> 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: <b>1000</b> gpm Bore Hole Diameter: <b>2.9</b> in. to <b>6.9</b> ft. and <b>1.8</b> in. to <b>120</b> ft.	5 Latitude: <b>39° 9' 12" N</b> (decimal degrees) Longitude: <b>96° 21' 38" W</b> (decimal degrees) Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: .....) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....
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7 WELL WATER TO BE USED AS:		
1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	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): .....

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 **12** in. to **20** ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface **2.4** in. Weight **12.3** lbs./ft. Wall thickness or gauge No. **0.49**

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 **90** ft. to **110** ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From **20** ft. to **110** ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☒ Cement grout ☐ Bentonite ☐ Other .....  
Grout Intervals: From **0** ft. to **20** 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? **NONE PRESENT** Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	35	BROWN CLAY			
35	50	BROWN CLAY (SANDY)			
50	75	SAND (FINE-MED.) YELLOW			
75	104	SAND (MED.-COARSE) YELLOW			
104	120	GRAY SHALE			

Notes:

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year) **1/13/13** and this record is true to the best of my knowledge and belief.  
Kansas Water Well Contractor's License No. **518** This Water Well Record was completed on (mo-day-year) **1/12/13**  
under the business name of **BLUE VALLEY DRIVING INC.**