

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Shawnee</u>	Fraction NW $\frac{1}{4}$ SE $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number <u>18</u>	Township Number T <u>11</u> S <u>8</u>	Range Number R <u>16</u> <u>E/W</u>
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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: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

2 WATER WELL OWNER: David Dooman (Spangles)
 RR#, St. Address, Box # 635 US Hwy 24 NW
 City, State, ZIP Code Topeka, KS 66608-1985

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S	<p>4 DEPTH OF COMPLETED WELL <u>30</u> ft.</p> <p>Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.</p> <p>WELL'S STATIC WATER LEVEL <u>25.53</u> ft. below land surface measured on mo/day/yr <u>4/23/08</u></p> <p>Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm</p> <p>Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm</p> <p>WELL WATER TO BE USED AS: <u>5</u> Public water supply <u>8</u> Air conditioning <u>11</u> Injection well</p> <p><u>1</u> Domestic <u>3</u> Feedlot <u>6</u> Oil field water supply <u>9</u> Dewatering <u>12</u> Other (Specify below)</p> <p><u>2</u> Irrigation <u>4</u> Industrial <u>7</u> Domestic (lawn& garden) <u>10</u> <u>Monitoring well</u></p> <p>Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr _____ Sample was submitted _____ Water well disinfected? Yes _____ No <u>X</u></p>
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5 TYPE OF CASING USED: 2 PVC 4 ABS 7 Fiberglass

Blank casing diameter 2 in. to 20 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.

Casing height above land surface 0 in., Weight SCH40 lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL: 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: 3 Mill slot 5 Guazed 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 30 ft. to 20 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 30 ft. to 18 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 3 Bentonite 4 Other _____

Grout Intervals: From 18 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)
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? IMMEDIATE VICINITY How many feet? IMMEDIATE VICINITY

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	CL - clay, dk gray w/rock fragments, caliche, stiff, low plastic becoming soft, moist, medium plasticity, dk brn			
10	15	CL - dark brown clay, soft to stiff, moist, med plasticity			
15	20	CL - dark brown clay, soft moist, high plasticity, becoming black banding			
20	24.5	SC- very fine grain sands, salt n pepper color, soft, loose.			
24.5	26	SC - salt n pepper color sands, becoming coarse grained			
26	30	SC - becoming coarser grain sands, wet, salt n pepper color			MW - 8R

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) 4/22/08 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 4/25/08 under the business name of Pratt Well Service, Inc. by (signature) [Signature]

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, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612- 1 367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.