

**WATER WELL RECORD Form WWC-5**

Original Record  Correction  Change in Well Use

Division of Water Resources App. No.

Well ID

<b>1 LOCATION OF WATER WELL:</b> County: <u>Leavenworth</u>		Fraction <u>SE 1/4 SW 1/4 NE 1/4 SW 1/4</u>	Section Number <u>33</u>	Township Number <u>T 11 S</u>	Range Number <u>R 22</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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<b>2 WELL OWNER:</b> Last Name: <u>Manion</u> First: <u>Annette/Jeff</u>		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"/>			
Business Address: <u>4540 Grove St</u> City: <u>Shawnee</u> State: <u>KS</u> ZIP: <u>66226</u>		<u>15097 170th St</u> <u>Bonner Springs, KS 66012</u>			

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

N

NW		NE	
W	SW	SE	E
S			

-----1 mile-----

**4 DEPTH OF COMPLETED WELL:** 334 ft.

Depth(s) Groundwater Encountered: 1) ..... ft.  
2) ..... ft. 3) ..... ft., or 4)  Dry Well

WELL'S STATIC WATER LEVEL: ..... ft.

below land surface, measured on (mo-day-yr).....  
 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: ..... gpm  
Bore Hole Diameter: 5.625 in. to 334 ft. and  
..... in. to ..... ft.

**5 Latitude:** 39.0478 .....(decimal degrees)  
**Longitude:** 94.9763 .....(decimal degrees)  
**Horizontal Datum:**  WGS 84  NAD 83  NAD 27  
**Source for Latitude/Longitude:**  
 GPS (unit make/model: .....)  
(WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper: .....

**6 Elevation:** 973 .....ft.  Ground Level  TOC  
**Source:**  Land Survey  GPS  Topographic Map  
 Other KOLAR.....

**7 WELL WATER TO BE USED AS:**

1. <input type="checkbox"/> Household	5. <input type="checkbox"/> Public Water Supply: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....
2. <input type="checkbox"/> Lawn & Garden	6. <input type="checkbox"/> Dewatering: how many wells? .....	11. Test Hole: well ID .....
3. <input type="checkbox"/> Livestock	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical
4. <input type="checkbox"/> Irrigation	8. <input type="checkbox"/> Monitoring: well ID .....	12. Geothermal: how many bores? <u>3</u> .....
5. <input type="checkbox"/> Feedlot	9. Environmental Remediation: well ID .....	a) Closed Loop <input type="checkbox"/> Horizontal <input checked="" type="checkbox"/> Vertical
6. <input type="checkbox"/> Industrial	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction	b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
	<input type="checkbox"/> Recovery <input type="checkbox"/> Injection	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 H.D.P.E...... CASING JOINTS:  Glued  Clamped  Welded  Threaded

Casing diameter 1 in. to 334 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface below 36 in. Weight ..... 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 ..... ft. to ..... 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 334 ft. to 0 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**Nearest source of possible contamination:**

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well
<input type="checkbox"/> Other (Specify) .....				

Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	19	SOIL & CLAY	115-122 SHALE	260	266	LIME
19	31	SANDY WET CLAY	122-123 LIME	266	270	SHALE
31	33	YELLOW SHALE	123-140 SHALE	270	274	LIME
33	36	SANDSTONE	140-150 LIME	274	285	SHALE
36	67	SHALE	150-174 SHALE	285	290	LIME
67	73	SANDSTONE	174-205 LIME	290	334	SHALE
73	103	LIME	205-215 SHALE	<b>Notes:</b> 5 TON VERTICAL EARTH LOOP		
103	108	SHALE	215-240 LIME			
108	115	LIME	240-260 SHALE			

**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) 10/16/2019..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 953..... This Water Well Record was completed on (mo-day-year) 10/21/2019..... under the business name of Allens Holdings & Investments dba EED..... Signature [Signature]