

WATER WELL RECORD Form WWC-5

Division of Water
Resources App. No.

Well ID

KAW-WY01

☒ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL: County: <u>Wyandotte</u>		Fraction <u>SW 1/4 SE 1/4 SE 1/4 1/4</u>	Section Number <u>29</u>	Township Number <u>T 11 S</u>	Range Number <u>R 24 E W</u>																																																						
2 WELL OWNER: Last Name: <u>First:</u> Business: <u>Kansas Geological Survey</u> Address: <u>University of Kansas</u> Address: <u>1930 Constant Ave</u> City: <u>Lawrence</u> State: <u>KS</u> ZIP: <u>66047</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"/> <u>1300 feet SE on gravel drive off S 78 St, 1900 feet SE of Douglas Ave and S 78 St</u>																																																								
3 LOCATE WELL WITH "X" IN SECTION BOX: N <table border="1" style="width:100%; text-align: center;"><tr><td> </td><td> </td><td> </td></tr><tr><td>-- NW --</td><td>-- NE --</td><td> </td></tr><tr><td>W</td><td> </td><td>E</td></tr><tr><td>-- SW --</td><td>-- SE --</td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table> S ----- 1 mile -----					-- NW --	-- NE --		W		E	-- SW --	-- SE --					4 DEPTH OF COMPLETED WELL: <u>65</u> ft. Depth(s) Groundwater Encountered: 1) ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: <u>45.2</u> ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <u>05-09-18</u> <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: gpm Bore Hole Diameter: <u>3.25</u> in. to <u>65</u> ft. and in. to ft.		5 Latitude: <u>39.058812</u> (decimal degrees) Longitude: <u>-94.764252</u> (decimal degrees) Horizontal Datum: <input checked="" 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 checked="" type="checkbox"/> Online Mapper: <u>Google Earth Pro</u>																																								
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6 Elevation: <u>769</u> ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input checked="" type="checkbox"/> Other: <u>Google Earth Pro</u>																																																											
7 WELL WATER TO BE USED AS: 1. 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 checked="" type="checkbox"/> Monitoring: well ID <u>KAW-WY01</u> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																											
8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter <u>2</u> in. to <u>65</u> ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface <u>36</u> in. Weight <u>0.698</u> lbs./ft. Wall thickness or gauge No. <u>Sch 40</u> TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) <input type="checkbox"/> Other (Specify) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) SCREEN-PERFORATED INTERVALS: From <u>50</u> ft. to <u>65</u> ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From <u>41</u> ft. to <u>65</u> ft., From ft. to ft., From ft. to ft.																																																											
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other Grout Intervals: From <u>0</u> ft. to <u>41</u> 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 checked="" type="checkbox"/> Other (Specify) <u>Kansas River</u> Direction from well? <u>NE</u> Distance from well? <u>500</u> ft.																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>10 FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr><td>0</td><td>4.5</td><td>Soils</td><td></td><td></td><td></td></tr> <tr><td>4.5</td><td>12</td><td>Sands</td><td></td><td></td><td></td></tr> <tr><td>12</td><td>16</td><td>Silt & Clay</td><td></td><td></td><td></td></tr> <tr><td>16</td><td>29.5</td><td>Sand</td><td></td><td></td><td></td></tr> <tr><td>29.5</td><td>33</td><td>Clay with Sand Streaks</td><td></td><td></td><td></td></tr> <tr><td>33</td><td>37.5</td><td>Sand</td><td></td><td></td><td></td></tr> <tr><td>37.5</td><td>38.5</td><td>Silty Lens</td><td></td><td></td><td></td></tr> <tr><td>38.5</td><td>67.9</td><td>Sand</td><td></td><td></td><td></td></tr> </tbody> </table>						10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	4.5	Soils				4.5	12	Sands				12	16	Silt & Clay				16	29.5	Sand				29.5	33	Clay with Sand Streaks				33	37.5	Sand				37.5	38.5	Silty Lens				38.5	67.9	Sand			
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11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) <u>05-09-2018</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) <u>05-21-2018</u> under the business name of <u>Kansas Geological Survey</u> Signature: <u>[Signature]</u>																																																											

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>

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