

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: Dickinson Fraction: SE 1/4 NW 1/4 NE 1/4 Section Number: 31 Township Number: T 110 Range Number: R 4 E W

2 WELL OWNER: Last Name: Shetler First: Levi 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 Address: 1958 3200 RD. From Upland go 3 miles south to
 Address: Chapman State: KS ZIP: 67431 3200 RA Then go 1/2 mile west 1/4 mile south in field
 City: Chapman

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

 W E
 S
 1 mile

4 DEPTH OF COMPLETED WELL: 120 ft.
 Depth(s) Groundwater Encountered: 1) 102 ft.
 2) _____ ft. 3) _____ ft., or 4) Dry Well
 WELL'S STATIC WATER LEVEL: 65 ft.
 below land surface, measured on (mo-day-yr) 4/13/2021
 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: 20 gpm
 Bore Hole Diameter: 9 in. to 120 ft. and _____ in. to _____ ft.

5 Latitude: N 39° 03.453 (decimal degrees)
Longitude: W 097° 01.434 (decimal degrees)
 Horizontal Datum: WGS 84 NAD 83 NAD 27
 Source for Latitude/Longitude: GPS (unit make/model: Garmin ETX 20)
 (WAAS enabled? Yes No)
 Land Survey Topographic Map
 Online Mapper: _____
6 Elevation: 1205 ft. Ground Level TOC
 Source: Land Survey GPS Topographic Map
 Other _____

7 WELL WATER TO BE USED AS:

1. Domestic: <input checked="" type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock <input type="checkbox"/> Irrigation	2. Feedlot	3. Industrial	4. <input type="checkbox"/> Public Water Supply: well ID _____	5. <input type="checkbox"/> Dewatering: how many wells? _____	6. <input type="checkbox"/> Aquifer Recharge: well ID _____	7. <input type="checkbox"/> Monitoring: well ID _____	8. Environmental Remediation: well ID _____	9. <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 _____	12. Geothermal: how many bores? _____	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 5 in. to 100 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
 Casing height above land surface 2 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 100 ft. to 120 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 25 ft. to 120 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other _____
 Grout Intervals: From 5 ft. to 25 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) _____
 Direction from well? _____ Distance from well? _____ ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	Top Soil	110	120	Brown Shale
1	10	Brown Clay			
10	21	Yellow Shale			
21	48	Brown Shale			
48	65	Limestone			
65	77	Tan Shale			
77	81	Limestone			
81	102	Tan Shale			
102	110	Limestone			

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-yr) 4/13/2021 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) 4/14/2021
 under the business name of Halderman Well Drilling
 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