| | | | | | -rel | 15ed- | |
|--|---|---|--|--|--------------------|-----------------|--|
| WATER WELL RECORD Form WWC-5 | | | Division of Water MW3 | | | | |
| | ge in Well Use | | irces App. No. | | Well ID | , | |
| 1 LOCATION OF WATER WELL: County: SHAWNEE | Fraction NE ¹ / ₄ NE ¹ / ₄ NW ¹ / ₅ | | ion Number 04 | Township Numb | er Range N R 16 | | |
| 2 WELL OWNER: Last Name: WEBBER First: BILLY | | Street or Rural Address where well is located (if unknown, distance and | | | | | |
| Business: A&B LLC direction from Address: 3101 E, 6TH ST. | | | | nearest town or intersection): If at owner's address, check here: | | | |
| Address: | | | | | | | |
| City: TOPEKA State: KS 3 LOCATE WELL A DEPOY OF CO | | | T | 00.0444 | | | |
| WITH "X" IN SECTION POY. 4 DEPTH OF COMPLETED WELL:20ft. Depth(s) Groundwater Encountered: 1)ft. | | | | 5 Latitude: 39.04412 (decimal degrees) Longitude: 95.63699 (decimal degrees) | | | |
| SECTION BOX: N Depth(s) Groundwater Encountered: 1) | | | | | | | |
| WELL'S STATIC W | WELL'S STATIC WATER LEVEL: 9.73 ft. below land surface, measured on (mo-day-yr). 11/6/19 | | | or Latitude/Longitude | : | | |
| | below land surface, measured on (mo-day-yr) | | | ☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No) | | | |
| Pump test data: Well water was ft. | | | ■ Land Survey □ Topographic Map | | | | |
| '' Well | after hours pumping gpm Well water was ft. | | | ☐ Online Mapper: | | | |
| SW SE after hours pumping | | | | | | -1 = TOC | |
| Estimated Yield:gpm Bore Hole Diameter:8.5 in. to20 ft. a | | | Source: Land Survey GPS Topographic Map | | | | |
| | in. to | | | Other | | | |
| 7 WELL WATER TO BE USED AS: 1 Demostric 10 Cit Field Water Supply: Jacob 10 Cit Field Water Supply | | | | | | | |
| | | | | 10. Oil Field Water Supply: lease | | | |
| | | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | |
| ☐ Livestock 2. ☐ Irrigation 8. ■ Monitoring: well ID | | | 12. Geothermal: how many bores? | | | | |
| 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor | | | b) Open Loop Surface Discharge Inj. of Water | | | | |
| 4. ☐ Industrial ☐ Recovery ☐ Injection | | | 13. Other (specify): | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted: | | | | | | | |
| 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other | | | | | | | |
| Casing diameter | | | | | | | |
| Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. SCH 40 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 .10 ft. to .20 ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 8 ft. to 20 ft., From ft. to ft., From ft. to ft. | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Concrete Surface Completion 0 -1 | | | | | | | |
| Grout Intervals: From | | | | | | | |
| Nearest source of possible contamination: Septic Tank Lateral L | nes 🔲 Pit Privy | | Livestock Pens | ☐ Insect | icide Storage | | |
| ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well | | | | | l | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify) ☐ Direction from well? NORTHWEST ☐ Distance from well? 50 ☐ ft. | | | | | | | |
| Direction from well? NORTHWEST | | | | f | ì | | |
| | OGIC LOG | FROM | TO I | ITHO. LOG (cont.) | or PLUGGING IN | NTERVALS | |
| 0 20 SILTY CLAY | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | 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) .1.1/6/19 | | | | | | | |
| under the business name of ASSOCIATED ENVIRONMENTAL INC. Signature | | | | | | | |
| Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Buteau 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. | | | | | | | |
| 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 | | | | | | | |

