

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:
 County: Douglas Fraction NE 1/4 NE 1/4 Section Number 23 Township Number T 12 S Range Number R 19 E
 Distance and direction from nearest town or city street address of well if located within city? 1/2 mile North of LAUREL on E1200 RD
2 WATER WELL OWNER: DICK EDMONSON
 RR#, St. Address, Box # : 1786 E 1200 Rd
 City, State, ZIP Code : LAWRENCE, KS 66049
 Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

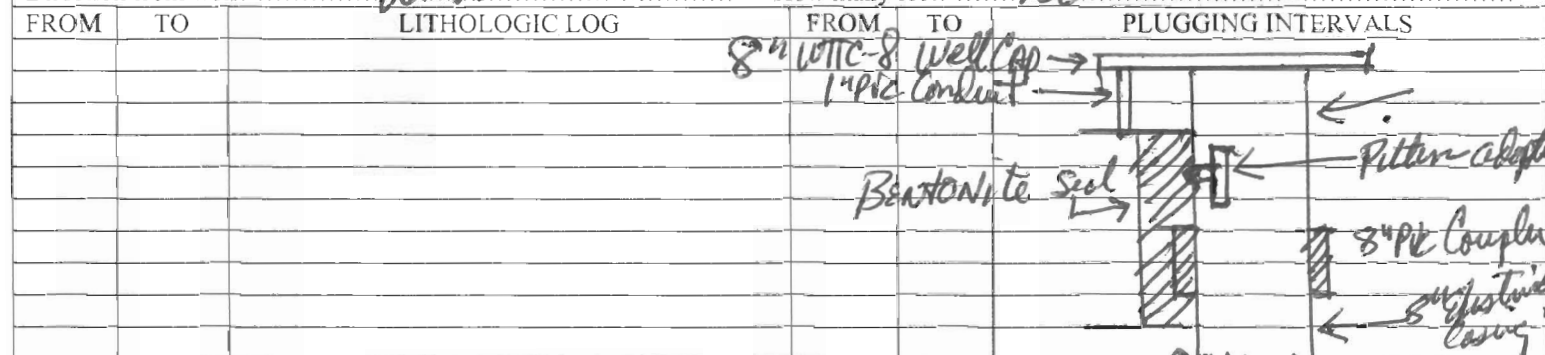
N		X			
S					

4 DEPTH OF COMPLETED WELL 135 ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL..... 75 ft. below land surface measured on mo/day/yr. 7-17-07
 Pump test data: Well water was.....ft. after..... hours pumping..... gpm
 Est. Yield.....gpm: Well water was.....ft. after..... hours pumping..... gpm
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes No ; If yes, mo/day/yr
 Sample was submitted..... Water well disinfected? Yes No

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued..... Clamped.....
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded.....
 PVC 4 ABS 7 Fiberglass Threaded.....
 Blank casing diameter ... 8" in. to ft., Diameter: in. to ft., Diameter in. to ft.
 Casing height above land surface..... 24" in., Weight.....lbs./ft. Wall thickness or gauge No. Sh. 40
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) N/A
 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) N/A
 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)
 SCREEN-PERFORATED INTERVALS: From..... ft. to ft., 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., From..... ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout Bentonite 4 Other
 Grout Intervals: From 7 ft. to 2 ft., From..... ft. to ft., From..... ft. to ft.
 What is the nearest source of possible contamination:
 1 Septic tank 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 Sepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well
 Direction from well? West How many feet? 150'



7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 7-17-07 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. 526 This Water Well Record was completed on (mo/day/year) 7-17-07
 under the business name of Patchey Electric & Plumbing by (signature) Tom Patchey
 INSTRUCTIONS: Use typewrite or ball point pen. PLEASE PRINT NAME and TITLE clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Geology and Environment, Bureau of Water Resources, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. 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/geowaterwells>.