

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: Leavonworth	Fraction NW ¼ SE ¼ NW ¼ SW ¼	Section Number 6	Township Number T 12 S	Range Number R 21 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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2 WELL OWNER: Last Name: Robins First: Jeremy Business Address: 410 N. Olivia Ave City: Lawrence State: KS ZIP: 66049	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"/> 14371 234th Street Tonganoxie, KS 66081
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3 LOCATE WELL WITH "X" IN SECTION BOX:

N

NW	NE
SW	SE

S

W ————— E

————— 1 mile —————

4 DEPTH OF COMPLETED WELL: **144** ft.

Depth(s) Groundwater Encountered: 1) **90-134** ft.

2) ft. 3) ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL: **73** ft.

below land surface, measured on (mo-day-yr) **03/01/2017**

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: **18** gpm

Bore Hole Diameter: **8 3/4** in. to **144** ft. and in. to ft.

5 Latitude: **39.035976** (decimal degrees)

Longitude: **-95.127011** (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: **WGS84**

6 Elevation: 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 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID	10. <input type="checkbox"/> Oil Field Water Supply: lease
6. <input type="checkbox"/> Dewatering: how many wells?	7. <input type="checkbox"/> Aquifer Recharge: well ID	11. Test Hole: well ID
8. <input type="checkbox"/> Monitoring: well ID	9. Environmental Remediation: well ID	12. Geothermal: how many bores?
<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection	13. <input type="checkbox"/> Other (specify):	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

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 **114** ft., Diameter **5** in. to **134-144** ft., Diameter in. to ft.

Casing height above land surface **24** in. Weight **SDR22** lbs./ft. Wall thickness or gauge No. **200.PSI**

TYPE OF SCREEN OR PERFORMANCE MATERIAL: Steel Stainless Steel Fiberglass PVC Other (Specify)

Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORMANCE 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 **114** ft. to **134** ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **144** ft. to **22** ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From **22** ft. to **2** ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

<input checked="" type="checkbox"/> Septic Tank	<input checked="" 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? **NW** Distance from well? **150'** ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	9	soil/clay			
9	49	sandstone			
49	50	lime			
50	51	shale			
51	126	sandstone			
126	128	shale			
128	134	sandstone			
134	144	lime			
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) **03/01/2017** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **561** This Water Well Record was completed on (mo-day-year) **03/03/2017** under the business name of **Evans Energy Development, Inc.** Signature: *[Signature]*

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 7/10/2015**