KOLAR Document ID: 1510680

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: Johnson | Fraction: NW ¼ NW ¼ NE ¼ SW ¼ | Section Number: 10 | Township Number: T 12 S | Range Number: R 25 ☑ E ☐ W

2 WELL OWNER: Last Name: Hoech First: George
Business: Hoech
Address: 5906 Reinhardt Dr
Address:
City: Fairway State: KS ZIP: 66205

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: ☑

3 LOCATE WELL WITH "X" IN SECTION BOX:

N
- - NW - - | - - NE - -
W X E
- - SW - - | - - SE - -
S
|----------1 mile---------|

4 DEPTH OF COMPLETED WELL: ….190…. ft.
Depth(s) Groundwater Encountered: 1) …… ft.
2) …….. ft. 3) …….. ft., or 4) ☑ Dry Well
WELL'S STATIC WATER LEVEL: …… ft.
☐ below land surface, measured on (mo-day-yr)……
☐ 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: …..6….. in. to ….190…. ft. and
…… in. to …… ft.

5 Latitude: ……39.0221024……(decimal degrees)
Longitude: ……94.6257132……(decimal degrees)
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: ……

6 Elevation: ……926……ft. ☑ Ground Level ☐ TOC
Source: ☐ Land Survey ☐ GPS ☐ Topographic Map
☑ Other KOLAR

7 WELL WATER TO BE USED AS:
1. Domestic: ☐ Household ☐ Lawn & Garden ☐ Livestock
2. ☐ Irrigation
3. ☐ Feedlot
4. ☐ Industrial
5. ☐ Public Water Supply: well ID ……
6. ☐ Dewatering: how many wells? ……
7. ☐ Aquifer Recharge: well ID ……
8. ☐ Monitoring: well ID ……
9. Environmental Remediation: well ID ……
☐ Air Sparge ☐ Soil Vapor Extraction
☐ Recovery ☐ Injection
10. ☐ Oil Field Water Supply: lease ……
11. Test Hole: well ID ……
☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores? ……5……
a) Closed Loop ☐ Horizontal ☑ Vertical
b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ 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 HDPE…… CASING JOINTS: ☐ Glued ☐ Clamped ☑ Welded ☐ Threaded
Casing diameter ……75…… in. to ……190…… ft., Diameter …… in. to …… ft., Diameter …… in. to …… ft.
Casing height above land surface ……0…… in. Weight …… lbs./ft. Wall thickness or gauge No. SDR11……
TYPE OF SCREEN OR PERFORATION MATERIAL:
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) ……
☐ Brass ☐ Galvanized Steel ☑ 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 …… 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.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other ……
Grout Intervals: From ……0…… ft. to ……190…… ft., From …… ft. to …… ft., From …… ft. to …… ft.
Nearest source of possible contamination: ☐ No potential source of contamination within 200 ft.
☐ 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) House……
Direction from well? ……N…… Distance from well? ……7…… ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	topsoil			
3	14	Clay, brown			
14	38	Shale			
38	47	Limestone			
47	82	Shale			
82	124	Limestone			
124	147	Shale			
147	190	Shale & Limestone layers			

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) ……03/16/2020…… and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ……760…… This Water Well Record was completed on (mo-day-year) ……03/16/2020…… under the business name of ……Associated Drilling, Inc.……

Send one copy to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well.
KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212