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: Douglas | Fraction: NE ¼ SE ¼ NW ¼ NW ¼ | Section Number: 1 | Township Number: T 13 S | Range Number: R 18 ☑ E ☐ W

2 WELL OWNER: Last Name: Saathoff First: Shawn
Business: Groundsource Inc.
Address: 1485 E 732 Rd
Address:
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: ☑

3 LOCATE WELL WITH "X" IN SECTION BOX:

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

4 DEPTH OF COMPLETED WELL: ….180…. 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 ….180…. ft. and
…… in. to …… ft.

5 Latitude: ……38.954336……(decimal degrees)
Longitude: ……95.367791……(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: ……1042……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 ……180…… 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 ☐ 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 …… 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 ……180…… ft., From …… ft. to …… ft., From …… ft. to …… ft.

Nearest source of possible contamination:
☐ 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? ……E…… Distance from well? ……19…… ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	Clay			
3	7	Broken Limestone			
7	37	Gray Shale			
37	42	Limestone			
42	180	Alternating layers Gray Shale & 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-year) ……11/14/2017…… 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) ……11/14/2017…… 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