

## WATER WELL RECORD

## Form WWC-5

Division of Water Resources App. No. 

<b>1 LOCATION OF WATER WELL:</b> County: Douglas		Fraction NE ¼ SW ¼ SE ¼ ¼		Section Number 36	Township No. T 13 S	Range Number R 19 <input checked="" type="checkbox"/> E <input type="checkbox"/> W								
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input checked="" type="checkbox"/> 1366 N Road 924 Lawrence, KS 66046				<b>Global Positioning System (GPS) information:</b> Latitude: 38.873306 (in decimal degrees) Longitude: 95.247134 (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input checked="" type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: .....) <input type="checkbox"/> Digital Map/Photo, <input checked="" type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m										
<b>2 WATER WELL OWNER:</b> R. Andrew Findlay RR#, Street Address, Box #: 10904 W 100th Terr. City, State, ZIP Code : Overland Park, KS 66214														
<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> N <div style="display: flex; align-items: center; justify-content: center;"> <div style="text-align: center; margin-right: 10px;">W</div> <table border="1" style="border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> <div style="text-align: center; margin-left: 10px;">E</div> </div> <div style="display: flex; align-items: center; justify-content: center; margin-top: 5px;"> <div style="width: 20px; height: 20px; border: 1px solid black; position: relative; margin: 0 5px;"> <div style="position: absolute; top: 0; left: 0; right: 0; height: 2px; background: black;"></div> <div style="position: absolute; bottom: 0; left: 0; right: 0; height: 2px; background: black;"></div> <div style="position: absolute; left: 50%; top: 50%; transform: translate(-50%, -50%); font-size: 10px;">X</div> </div> <div style="text-align: center;">S</div> </div> <div style="text-align: center; margin-top: 5px;">1 mile</div>											<b>4 DEPTH OF COMPLETED WELL</b> 340 ft. Depth(s) Groundwater Encountered (1) 150 ft. (2) 330 ft. (3) ..... ft. WELL'S STATIC WATER LEVEL 207 ft. below land surface measured on mo/day/yr ..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm EST. YIELD 4 ..... gpm. Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter 9.5 in. to 340 ft., and ..... in. to ..... ft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well ..... Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted ..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other ..... <b>CASING JOINTS:</b> <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input type="checkbox"/> Threaded Casing diameter 6.5/8 in. to 340 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface 3 in., Weight SCH 40 lbs./ft., Wall thickness or gauge No. 200 PSI <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) ..... <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) <b>SCREEN OR PERFORATION OPENINGS ARE:</b> <input type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input checked="" type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) ..... <b>SCREEN-PERFORATED INTERVALS:</b> From 290 ft. to 340 ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. <b>GRAVEL PACK INTERVALS:</b> From 40 ft. to 340 ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.														
<b>6 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other ..... Grout Intervals: From 0 ft. to 40 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. What is the nearest source of possible contamination: <input checked="" type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <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 ..... Direction from well NW Distance from well 150'														
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS									
0	15	Brown Shale												
15	125	Shale												
125	155	Sandstone												
155	171	Limestone												
171	261	Shale												
261	276	Limestone												
276	300	Shale												
300	330	Sandstone												
330	340	Sandy Shale												
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 1/6/11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 595 This Water Well Record was completed on (mo/day/year) 2/25/11 under the business name of JESSE YOKUM WELL DRILLING by (signature) Jesse Yokum														
<b>INSTRUCTIONS:</b> Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite #20, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> .														